City and Port of Cardiff

PUBLIC HEALTH DEPARTMENT

ANNUAL REPORT
1957

W. POWELL PHILLIPS, O.B.E., M.R.C.S., L.R.C.P., D.P.H.

Medical Officer of Health
Principal School Medical Officer
Port Medical Officer

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COMMITTEES

(As at December, 1957)

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and the following co-opted Members :—

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,,	T. E. Coakley	,,	J. E. H. Edwards
,,	H. Ferguson Jones	,,	W. H. Thomas
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,,	D. E. Howells	,,	J. N. Rees
,,	G. A. S. Turnbull	,,	Eva Davies

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Mrs. Eric Evans, j.p.
The Rev. F. Wall
Mrs. John Griffin
Professor Eric Evans, m.a.
Mr. George E. Brown
The Rev. W. A. Winton
The Rev. Griffith J. Harris
Mr. E. Tear

PREFACE

I have the honour to present my Annual Report on the state of the public health for the City of Cardiff for the year 1957. The estimated population for mid-1957 was 251,300. Another landmark in the development of the City has been reached having passed the quarter of a million population.

Births.—The birth-rate in Cardiff remained higher than that for England and Wales, the National rate being 16·6 per 1,000 population compared with 18·28 per 1,000 population for the City. Last year it was satisfactory to record that the infant mortality rate showed an improvement in relation to the somewhate higher rate that we had experienced in comparison to the National figure for the three preceding years. For the year now under review the infant mortality rate in Cardiff was 22·85 deaths per 1,000 live births, compared with the rate for England and Wales of 22·9. This is satisfactory because it is not only the lowest rate of infant deaths ever achieved in Cardiff, but in addition it is slightly better than the National average for the year. While this is a satisfactory position to note, it must be stressed that with the relatively low infant mortality which is now being attained it must be anticipated that fluctuations are inevitable, especially as congenital abnormalities, prematurity and atelectasis are now the outstanding features which contribute to infant deaths. These factors are so far not able to respond to any known preventive measures. Every effort must continue to be made to improve the co-operation of general practitioners, hospitals and local health services towards the provision of completely efficient measures for the care of the mother and child. Several conferences have been held during the year between those concerned with the ante-natal care of mothers. It is pleasing to say that Professor Duncan, the Professor of Obstetrics in the Welsh National School of Medicine, and his colleagues are actively concerned in unifying the methods of supervision and care for the expectant mother throughout the City. Priority for admission to hospital for confinement is a problem which requires careful assessment. During 1957 the proportion of live and still-births where the confinement was carried out in maternity hospital or private nursing home was 68 per cent. Even with this number of beds for confinement there are still a number of women who would, with advantage, be better catered for if there were more beds. This has particular reference to those where the home conditions are not ideal for the birth of a child.

Deaths.—The crude death-rate in Cardiff was 11·13 per 1,000 populaton, with 11·5 for England and Wales. Diseases of the circulatory system, and in particular coronary disease, is now the chief cause of death. Malignant disease has not taken a greater toll, with the exception of cancer of the lung, which gave rise to 20 more deaths in 1957 than in the preceding year. This is a significant increase and heed should be taken by the public of the relationship between this malignant illness and the habit of smoking. There is no doubt that the man in the street is well aware of the risk, but the attitude probably adopted is that others may be affected but I shall escape. Certainly propaganda is best directed towards the young, to prevent their commencing the smoking habit, but the elders cannot escape blame by this means because both good and bad habits are copied by the younger generation.

Infectious Diseases.—There has been an increase of measles during the year, which was expected as there were very few cases reported in the previous year. Whooping cough has once more chiefly affected those over five years.

One man died during the year as a result of infection by leptospira icterohaemorrhagiae, commonly known as " Weil's " Disease. He was in the piggery business. There is little doubt that the source of the infection was from rats, as we know that a large proportion of the rat population is infected with this organism. His business of course accounted for exposure. Others especially exposed to this risk are sewermen, and all those employed by the Council are warned to visit their doctor when they have any symptoms and to show a special card drawing the practitioner's notice to their particular employment.

Immunisation for the prevention of poliomyelitis is keeping pace with the supply of vaccine. Some 50 per cent of the children have been treated and of the school population, 70 per cent will be completed within the year. There were twelve paralytic cases of poliomyelitis notified and one non-paralytic. One death occurred. Each case has been investigated but the precise mode of spread of infection remains as a problem to be solved.

Active measures are being taken to bring all contacts of tuberculosis to the Chest Physician for examination. It is noteworthy that, for the first time since deaths from tuberculosis have been recorded, Cardiff has a lower death rate from this infection than the National average. Dr. A. H. Griffith, Senior Medical Officer in the Public Health Department, has been awarded a " Cecil Prosser Research Scholarship " by the Welsh National School of Medicine. This is for the purpose of active research in preventive measures particularly by the use of B.C.G. vaccination.

Another interesting development during the year has been the post-graduate training courses for doctors in the preventive treatment of tuberculosis by B.C.G. vaccination. Professor Heaf organised these courses and the practical demonstrations in methods and techniques were undertaken in the Public Health Department. This is worth-while work and has the advantage of bringing doctors from other Authorities to the Department with a constant exchange of experiences, not only on the particular subject which they are studying but on other public health topics.

Maternity and Child Welfare.—During the year a very excellent clinic was built in the Fairwater district, and it is hoped that the schemes for Llanrumney and Llanishen will soon be well on the way. Mention has been made of the continued work which is being undertaken to co-ordinate all those vitally concerned with the health of the expectant mother.

School Health Service.—The provisions for the health and education of the handicapped child continue to engage a large amount of the time in the school health department. During the year a special centre providing the most up-to-date methods of physical care and training together with education for the spastic child was opened at our Greenhill Open Air School. The purpose of this centre is to secure the attendance of the young spastics and provide them with the best medium possible to improve their physical and mental attainments. It is a small class for up to twelve children. Teaching, medical attention, physiotherapy and speech training proceed concurrently in a bright and well equipped centre which has been built for the purpose. It is non-residential. Additional arrangements are proposed for the care of partially deaf children with the object of giving them special aid and yet permitting them to enjoy a normal school life.

Other Matters of Note.—Old age becomes of increasing importance to all concerned with public health. It is a pity that no mention can be made in this preface of help by the provision of any material addition to the number of beds for the chronic sick. The position in Cardiff is deplorable and the prolonged period which elderly men and women have to wait for hospital treatment is acutely felt by their general practitioners and all who care for them. To bring the number of beds into any degree of relationship with the needs, another 174 beds should be made available in the Cardiff area. The general practitioners, domiciliary nursing service and home helps are playing their part in the care of the chronic sick, but unless hospital treatment is to hand at the time it is needed, much of their effort is fruitless. Furthermore, delay at the vital moment is accentuating the problem and has a "snowball" effect. My Committee have expressed their concern on this score and it is sincerely hoped that the emphasis placed on this subject here may stimulate those responsible to take immediate action.

So much concern is felt about the shortage of beds for the aged sick that a voluntrary committee for the care of the elderly is actively engaged in collecting voluntary funds to open a home with the object of in some way improving the position. They have committed themselves to a large expenditure of money for this purpose. This emphasises the public concern at the lack of provision locally.

Mr. W. G. Pyatt, M.B.E., retired at the end of this year. He left the department with the knowledge that his Committee and colleagues appreciated to the full the remarkable standard which he had built up in his section of the department. He will be missed. Mr. W. Bate, M.A., D.P.A., has been appointed to succeed him and he gives promise of being a worthy successor. One of his first concerns will be the large clearance area which has been designated in the Docks area of the City. Of necessity, housing, clean food and clean air will engage a large amount of his time in the future. A very loyal colleague, Mr. S. Mellings, the Epidemic Officer, retired after more than half a century with the Council. He has been largely responsible for the investigation of infectious disease and the schemes for preventive inoculations.

In a brief review of the work and problems of the Public Health Department it is impossible to touch on all our activities, but it is an inspiration to all my colleagues in the Department to realise how concerned and anxious the Health Committee is to embark on all measures which may lead to an improvement in the health facilities available to the public.

W. POWELL PHILLIPS.

Public Health Department,
City Hall, Cardiff.

Publications

"A New Record System for the Tuberculosis Service of Local Health Authorities," by Philip H. Williams, Administrative Officer. *The Medical Officer*, 23rd August, 1957.

"Television and Children's Eyesight," by A. H. Griffith, M.B., B.S., D.P.H. *British Medical Journal*, 30th November, 1957.

PUBLIC HEALTH DEPARTMENT STAFF (as at 31st December, 1957)

MEDICAL OFFICER OF HEALTH (CITY AND PORT) AND PRINCIPAL SCHOOL MEDICAL OFFICER

W. Powell Phillips, o.b.e., m.r.c.s., l.r.c.p., d.p.h.

DEPUTY MEDICAL OFFICER OF HEALTH AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER

Cecil W. Anderson, m.b., ch.b., d.p.h., t.d.d.

SENIOR MEDICAL OFFICERS

A. H. Griffith, m.b., b.s., d.p.h.
Nancy K. Gibbs, m.r.c.s., l.r.c.p., d.p.h.

ASSISTANT MEDICAL OFFICERS AND SCHOOL MEDICAL OFFICERS (Whole-time)

Jean W. Smellie, m.b., ch.b., d.p.h.
G. Edward Phillips, m.r.c.s., l.r.c.p., d.p.h.
R. M. Carmichael, m.b., ch.b.
N. Frank, m.b., d.p.h., d.t.m.
Anne Guy, b.sc., m.b., b.s., d.c.h., d.p.h.
Enid Curran, m.b., b.ch., d.c.h.

Eight Part-time Assistant Medical Officers

VISITING SPECIALIST MEDICAL OFFICERS

Rupert Parry, m.d., b.s., f.r.c.s., Ophthalmic Surgeon
A. O. Parker, m.d., f.r.c.s., Orthopaedic Surgeon
Hector A. Thomas, f.r.c.s., Aural Surgeon
Professor A. G. Watkins, m.d., f.r.c.p., Professor of Child Health
S. H. Graham, m.d., Chest Physician

DENTAL

Principal School Dental Officer—H. V. Newcombe, l.d.s.

Dental Officers

D. W. Elliot, l.d.s.
C. N. Howitt, l.d.s.
J. W. Lewis, l.d.s.
J. McFarlane, l.d.s., l.r.c.p. & s., f.d.s. (hon.)
D. J. Andrews, l.d.s.

Four Part-time Dentists. Eight Dental Clerk-Attendants.

NURSING AND MIDWIFERY

Superintendent Health Visitor—Miss N. M. Osmond

One Deputy Superintendent. Fifty-one Health Visitors. Two State Registered Nurses.

Non-Medical Supervisor of Midwives—Miss M. Buckley

Sixteen Municipal Midwives.

SANITARY ADMINISTRATION

Chief Public Health Inspector (Urban)—W. G. Pyatt, m.b.e.

One Deputy Chief Public Health Inspector; Eighteen Public Health Inspectors; One Lady Visitor for Housing Estates; One Rodent Officer

Chief Port Health Inspector—T. G. Newby

Two Assistant Port Health Inspectors; One Deratisation Officer

VETERINARY, MEAT INSPECTION AND ABATTOIR

Veterinary Officer and Chief Meat Inspector

J. H. M. Hughes, m.r.c.v.s., d.v.s.m.

Four Meat Inspectors; One Additional Inspector, Diseases of Animals Acts; One Abattoir Manager.

PUBLIC ANALYST'S LABORATORY

Public Analyst—S. Dixon, m.sc., f.r.i.c.

One Senior Assistant Chemist; Three Assistant Chemists; One Laboratory Technician

ADMINISTRATION, ETC

Chief Administrative Assistant—A. E. Brain

Administrative Officers—Mental Health and Finance—W. C. Sweetland
Maternity, Child Welfare and School Health—P. H. Williams

Administrative and Clerical Assistants—General, Finance, Maternity and Child Welfare, etc.—27
Sanitary Administration—4
School Health Service—16
Others—3

Epidemic Officer, Ambulance Officer, Domestic Help Organiser, Public Relations Officer, Duly Authorised Officers—2; Senior Supervisor, Occupation and Training Centres, Orthoptists (Single-handed)—2; Speech Therapists—3.

GENERAL HEALTH SERVICE

1—SUMMARY OF GENERAL AND VITAL STATISTICS

Area (acres) :—	
Including inland water and foreshore	18,066
Including inland water (excluding foreshore)	15,271
Excluding inland water	14,867
Population :—	
Census, 1951	243,632
Registrar-General's estimate, mid-1957	251,300
Number of persons per acre	16·90
Estimated number of inhabited houses	66,499
Estimated number of inhabited houses per acre	4·47
Estimated average number of persons per occupied house	3·76
Rateable Value, 1/4/58	£3,885,268
Estimated product of a penny rate	£15,050
Live Births .. 4,595. Birth-rate per 1,000 — Crude	18·28
Live Births .. 4,595. Birth-rate per 1,000 — Adjusted by A.C.F.	17·19
Deaths .. 2,798. Death-rate per 1,000 — Crude	11·13
Deaths .. 2,798. Death-rate per 1,000 — Adjusted by A.C.F.	12·47
Excess of births over deaths—Males, 820 ; Females, 977. Total	1,797
Deaths under one year . 104. Death rate per 1,000 live births	22·85
Deaths under one month .. 78. Death rate per 1,000 live births	16·97

		Death-rate per 1,000 Total Births
Deaths arising from Pregnancy, Childbirth, or Abortion	3	0·64

Deaths from various causes :—	*Number*	*Death-rate per 1,000 population*
Meningococcal infections	2	0·008
Typhoid fever	—	—
Measles	—	—
Scarlet fever	—	—
Whooping cough	1	0·004
Diphtheria	—	—
Tuberculosis of respiratory system	21	0·083
Other forms of tuberculosis	3	0·012
Cancer, all forms, including leukaemia	488	1·94
Influenza	37	0·147
Acute poliomyelitis	1	0·004
Enteritis and diarrhoea (under 2 years)	2	0·008
	per 1,000 *live births*	0·44

II—AREA AND POPULATION

The area of Cardiff (land and inland water but excluding foreshore) is 15,271 acres.

According to the Census of 1951, the population of Cardiff was 243,632 (males 115,468, females 128,164).

The population at mid-1957, as estimated by the Registrar-General, was 251,300 and it is on this figure that the vital statistics for 1957 are computed.

III—BIRTHS

The numbers of Births and Still-births registered and allocated to Cardiff during 1957 sub-divided according to sex and legitimacy, are shown in Table I.

Live-births and crude rates per 1,000 population are compared with the England and Wales figures for past years in Table II.

Still-birth statistics and illegitimate birth figures are shown in Tables III and IV respectively.

Table I

Live Births

	Legitimate	Illegitimate	Total
Males	2,236	113	2,349
Females	2,125	121	2,246
TOTAL ..	4,361	234	4,595

Still Births

	Legitimate	Illegitimate	Total
Males	50	3	53
Females	43	4	47
TOTAL ..	93	7	100

Table II

Live Births

Year	Population	Legitimate Births	Illegitimate Births	Total	Birth Rate	England & Wales Birth Rate
1947 ..	230,630	5,039	260	5,299	22·9	20·5
1948 ..	240,600	4,666	209	4,875	20·3	17·8
1949 ..	243,500	4,544	216	4,760	19·56	16·7
1950 ..	244,600	4,204	204	4,408	18·02	15·8
1951 ..	243,627	4,142	185	4,327	17·77	15·4
1952 ..	244,800	4,140	211	4,351	17·77	15·3
1953 ..	246,600	4,216	205	4,421	17·93	15·4
1954 ..	248,000	4,280	212	4,492	18·11	15·2
1955 ..	248,400	3,985	202	4,187	16·85	15·0
1956 ..	249,800	4,251	216	4,467	17·88	15·7
1957 ..	251,300	4,361	234	4,595	18·28	16·6

Table III — Still Births

Year	Legitimate	Illegitimate	Total	Rate per 1,000 total births		Rate per 1,000 population	
				Cardiff	England & Wales	Cardiff	England & Wales
1947	129	7	136	25	24	0·56	0·51
1948	129	4	133	26	23	0·55	0·42
1949	130	9	139	28	23	0·57	0·39
1950	104	9	113	25	23	0·46	0·37
1951	120	7	127	29	23	0·52	0·36
1952	103	9	112	28	23	0·46	0·35
1953	99	—	99	22	22	0·40	0·35
1954	110	7	117	25	23	0·47	0·36
1955	122	8	130	30	23	0·50	0·35
1956	113	5	118	25·7	23	0·47	0·37
1957	93	7	100	21·3	22·6	0·40	0·37

Table IV — Illegitimate Births

Year	Live	Still	Total	Rate per 1,000 total births		Rate per 1,000 population	
				Cardiff	England & Wales	Cardiff	England & Wales
1947	260	7	267	49	53	1·11	1·12
1948	209	4	213	43	54	0·89	0·99
1949	216	9	225	46	51	0·92	0·87
1950	204	9	213	47	51	0·87	0·82
1951	185	7	192	43	49	0·79	0·75
1952	211	9	220	49	49	0·90	0·76
1953	205	—	205	45	48	0·83	0·74
1954	212	7	219	48	47	0·88	0·71
1955	202	8	209	48	48	0·84	
1956	216	5	221	48	48	0·86	
1957	234	7	241	51		0·96	

IV—DEATHS

Deaths from all Causes.—The total number of deaths from all causes and at all ages registered during the year and allocated to Cardiff was 2,798 (1,529 males and 1,269 females). The total number of deaths registered in Cardiff was 3,033 but 526 of these were deaths of non-residents, which occurred mainly in hospitals and nursing homes, and 291 deaths of residents of Cardiff occurred and were registered in other areas. Allowance has been made for these outward and inward transferable deaths in arriving at the net number.

The following is a comparison of the death-rate for 1957, and the preceding ten years with the death-rates for England and Wales for the same period.

Year	Deaths	Crude Death Rate	England & Wales Death Rate
1947	3,036	13·1	12·3
1948	2,667	11·1	11·0
1949	2,784	11·44	11·8
1950	2,837	11·59	11·6
1951	3,182	13·07	12·5
1952	2,724	11·13	11·3
1953	2,774	11·25	11·4
1954	2,872	11·58	11·3
1955	2,830	11·39	11·7
1956	2,809	11·24	11·7
1957	2,798	11·13	11·5

Cancer.—The number of deaths from malignant neoplasms was 472 (279 males and 193 females). The deaths are classified according to age and localisation of the disease in the Table on page 6. The total cancer deaths excluding leukaemia and aleukaemia for the previous ten years are shown below.

Year	No. of Deaths			Death Rates		
	Males	Females	Total	Males	Females	Total
1947	206	234	440	1·85	1·95	1·90
1948	244	219	463	2·19	1·69	1·92
1949	265	205	470	2·23	1·59	1·93
1950	243	229	472	2·11	1·76	1·93
1951	256	243	499	2·20	1·90	2·05
1952	253	229	482	2·17	1·78	1·97
1953	278	305	483	2·37	1·58	1·97
1954	261	244	505	2·20	1·89	2·04
1955	270	228	498	2·27	1·76	2·00
1956	277	233	510	2·31	1·79	2·04
1957	279	193	472	2·32	1·47	1·88

Deaths from Motor Vehicle Accidents.—An unusually high number of deaths due to road traffic accidents was recorded in the year—41 deaths (34 males and 7 females) as compared with 25, the average number in the preceding 10 years. It is with the greatest regret that I refer here to two members of my own staff whose deaths are included in this number. One, a man of 22, was killed when, wheeling his pedal cycle home from a dance in the early morning a motor vehicle ran into the back of him. The other was a public health inspector aged 36 with a fine record of service in the R.A.F. during the war, who was a passenger in his own car when it collided with another vehicle in successfully avoiding some pedestrians on a very busy trunk road after dark.

Other Accidents.—Other deaths due to violence totalled 62 (38 males and 24 females) and of that number, 35 were under 65 years of age—twenty-two of them under 45 years. Home accidents accounted for 34 deaths.

Accidents in the Home are usually associated with the very young and the very old, but only eleven of the 34 were of persons over 80 years of age and four were under 5 years. Causes of the home accidents were, as regards the adults, recumbency following falls, 18 ; poisoning, 5 ; burns and scalds, 4 ; others, 3, and the four infants died of burns, 1 ; poisoning 2 and inhalation of food 1.

Accidents other than in the Home.—These were mainly in work, but 10 of them were due to boat accidents or drowning and 12 were due to falls.

Maternal Mortality.—There were 3 deaths during the year arising from pregnancy, the causes of death being :—

1. Shock due to spontaneous rupture of the uterus during parturition. Bronchial pneumonia and diabetes mellitus.

2. Acute bronchopneumonia due to inhalation of intestinal contents during anaesthesia for instrumental delivery of a full term child. Pre-eclamptic toxaemia of pregnancy. Misadventure.

3. Pulmonary embolism due to post partum thrombosis of the pelvic and leg veins. Post mortem without inquest.

Infant Mortality.—The number of deaths under 1 year was 104. Of these 94 were legitimate and 10 illegitimate. Sixty-seven deaths occurred of infants under 1 week and when the 100 still-births are added, we have a peri-natal mortality rate of 35·57. The neo-natal deaths number 78, 75% of the total infant deaths. The infant deaths causing greatest concern are, birth injuries 14 deaths, pneumonia 18 deaths (10 over 1 month), prematurity 13 deaths, asphyxia and atelectasis 22 deaths and congenital malformation 19 deaths.

The table below compares the infant mortality rate with the preceding 10 years and with the rates for England and Wales.

Year	Infant Deaths			Neonatal Deaths			Still Births		
	No.	Rate per 1,000 Live Births C'diff.	E. & W.	No.	Rate per 1,000 Live Births C'diff.	E. & W.	No.	Rate per 1,000 Total Births C'diff.	E. & W.
1947	288	54·0	41·3	142	26·8	22·7	136	25	24·0
1948	176	36·0	33·9	88	18·1	19·7	133	26	23·2
1949	149	31·0	32·4	81	17·0	19·3	139	28	22·7
1950	121	27·0	29·6	74	16·8	18·5	113	25	22·6
1951	140	32·0	29·7	82	18·9	18·8	127	29	23·0
1952	124	28·0	27·6	79	18·1	18·3	112	28	22·7
1953	119	27·0	26·8	70	15·8	17·7	99	22	22·4
1954	153	34·0	25·4	98	21·9	17·7	117	25	23·5
1955	139	33·21	24·9	81	19·1	17·3	130	30	23·1
1956	124	27·76	23·8	85	19·03	16·9	118	25·7	22·9
1957	104	22·85	22·9	78	16·97	16·5	100	21·3	22·4

The causes of death of infants under one year of age in age periods during 1957 (compiled from figures supplied by the Registrar-General) are shown in the following table :

Cause of Death	Under 1 wk.	1—2 wks.	2—3 wks.	3—4 wks.	Total under 4 wks.	4 wks. —3 mths.	3—6 mths.	6—9 mths.	9—12 mths.	Total
Meningococcal Infection ..	—	—	—	1	1	—	1	—	—	2
Other Infective & Parasitic Diseases	—	—	—	—	—	1	—	—	—	1
Influenza	—	—	—	—	—	—	1	—	—	1
Pneumonia	4	2	1	1	8	5	3	1	1	18
Bronchitis	—	—	—	—	—	1	—	—	1	2
Haemorrhagic conditions ..	1	—	—	—	1	—	—	—	—	1
Other accidents	—	—	—	—	—	1	—	—	—	1
Injury at Birth	14	—	—	—	14	—	—	—	—	14
Congenital Malformation ..	10	3	1	1	15	2	1	1	—	19
Prematurity & Immaturity	13	—	—	—	13	—	—	—	—	13
Post natal asphyxia and atelectasis	22	—	—	—	22	—	—	—	—	22
Gastro enteritis	—	—	—	—	—	2	—	—	—	2
Diseases of ear	—	—	—	—	—	—	1	—	—	1
Haemolytic disease of newborn	2	—	—	—	2	—	—	—	—	2
All other causes	1	1	—	—	2	2	—	1	—	5
All causes	67	6	2	3	78	14	7	3	2	104
Percentage	64·4	5·8	1·9	2·9	75·0	13·5	6·7	2·9	1·9	100·0

The following table, compiled from figures supplied by the Registrar-General, shows the causes of death at various ages during 1957 :—

Causes of Death	All Ages			Age Groups								
	M.	F.	Total	Under 1 yr.	1–2 yrs.	2–5 yrs.	5–15 yrs.	15–25 yrs.	25–45 yrs.	45–65 yrs.	65–75 yrs.	75 and over
1. Tuberculosis of Respiratory System	10	11	21	—	—	—	—	—	4	12	4	1
2. Other Forms of Tuberculosis	2	1	3	—	1	—	—	—	—	—	1	1
3. Syphilitic Disease	6	6	12	—	—	—	—	—	—	6	4	2
4. Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	—	1	1	—	1	—	—	—	—	—	—	—
6. Meningococcal Infection	—	2	2	2	—	—	—	—	—	—	—	—
7. Acute Poliomyelitis	1	—	1	—	1	—	—	—	—	—	—	—
8. Measles	—	—	—	—	—	—	—	—	—	—	—	—
9. Other Infective and Parasitic Diseases	2	3	5	1	—	—	—	—	—	3	1	—
Malignant Neoplasm—												
10. Stomach	55	39	94	—	—	—	—	1	1	39	23	30
11. Lung, Bronchus	113	6	119	—	—	—	—	—	3	69	35	12
12. Breast	—	43	43	—	—	—	—	—	2	19	11	11
13. Uterus	—	25	25	—	—	—	—	—	—	12	11	2
14. Other Malignant and Lymphatic Neoplasm	111	80	191	—	—	—	1	—	12	73	60	45
15. Leukaemia, Aleukaemia	12	4	16	—	—	1	2	3	2	3	4	1
16. Diabetes	4	9	13	—	—	—	—	1	—	4	6	2
17. Vascular Lesions of the Nervous System	144	239	383	1	—	—	—	—	4	65	115	198
18. Coronary Disease, Angina	360	192	552	—	—	—	—	—	10	163	188	191
19. Hypertension with heart disease	27	33	60	—	—	—	—	—	1	14	23	22
20. Other Heart Diseases	118	160	278	—	—	—	—	—	7	53	54	164
21. Other Circulatory Diseases	70	76	146	—	—	—	—	—	—	18	40	88
22. Influenza	20	17	37	1	—	—	4	—	2	11	13	6
23. Pneumonia	64	52	116	18	2	—	3	1	5	19	21	47
24. Bronchitis	115	32	147	2	—	1	—	—	—	42	45	57
25. Other Respiratory Diseases	20	7	27	—	—	—	—	—	2	12	9	4
26. Ulceration of Stomach or Duodenum	15	13	28	—	—	—	—	—	—	11	8	9
27. Gastritis, Enteritis, Diarrhoea	4	5	9	2	—	—	1	—	1	2	—	3
28. Nephritis and Nephrosis	10	19	29	—	—	1	—	—	5	7	6	10
29. Hyperplasia of the Prostate	16	—	16	—	—	—	—	—	—	1	3	12
30. Pregnancy, Childbirth	—	3	3	—	—	—	—	—	3	—	—	—
31. Congenital Malformations	11	13	24	19	—	—	—	—	2	2	1	—
32. Other Defined and Ill-defined Diseases	124	140	264	57	1	1	2	4	18	36	45	100
33. Motor Vehicle Accidents	34	7	41	—	2	4	6	8	5	6	5	5
34. All Other Accidents	38	24	62	1	1	3	2	6	9	13	7	20
35. Suicide	23	6	29	—	—	—	—	1	9	10	7	2
36. Homicide and Operations of War	—	1	1	—	—	—	—	—	1	—	—	—
All causes	1,529	1,269	2,798	104	9	11	21	25	108	725	750	1,045
Percentages of Total Deaths				3·7	0·3	0·4	0·7	0·9	3·9	25·9	26·8	37·4

TABLE SHOWING POPULATION, BIRTH-RATES, DEATH-RATES, INFANT AND MATERNAL MORTALITY RATES, ETC., OF A NUMBER OF THE LARGER AUTHORITIES FOR 1957.

Name of Authority	England and Wales	Birmingham	Bradford	Bristol	Cardiff	Kingston-upon-Hull	Leeds	Leicester	Liverpool	Manchester	Newcastle-upon-Tyne	Nottingham
Registrar General's estimated population for 1957 ..	44,907,000	1,103,000	287,000	439,600	251,300	300,000	509,790	281,200	768,700	682,000	275,100	312,600
Comparability factor—												
(*a*) Births	—	0·94	1·00	1·00	0·94	0·96	0·98	1·00	0·93	0·96	0·96	0·95
(*b*) Deaths	—	1·07	0·98	0·90	1·12	1·24	1·14	1·05	1·22	1·17	1·14	1·13
Crude birth rate per 1,000 population	16·6	17·14	17·3	15·89	18·28	18·3	16·5	15·7	20·87	18·22	18·17	17·52
Birth rate as adjusted by factor	—	16·11	17·3	15·89	17·19	17·57	16·2	15·7	19·41	17·49	17·44	16·64
Crude death rate per 1,000 population	11·5	11·19	14·1	11·79	11·13	10·45	11·4	11·3	11·83	12·40	12·34	10·82
Death rate as adjusted by factor	—	11·97	13·8	10·61	12·47	13·0	13·0	11·9	14·43	14·51	14·07	12·23
Infant mortality rate per 1,000 live births	22·9	24·64	28·9	18·33	22·85	29·27	24·6	17·6	26·37	30·10	23·21	23·0
Neonatal mortality rate per 1,000 live births	16·9	17·66	15·0	13·75	16·97	18·9	17·7	13·6	17·51	21·01	16·21	15·15
Stillbirth rate per 1,000 total births	22·4	21·53	26·6	22·12	21·30	24·3	21·0	19·3	24·86	25·95	23·01	19·51
Perinatal mortality rate per 1,000 total births	—	36·95	36·2	33·88	35·57	40·45	35·3	30·6	39·08	43·51	36·55	31·14
Maternal mortality rate per 1,000 total births	0·47	0·41	0·19	0·14	0·64	0·54	0·35	0·44	0·43	0·63	0·19	0·36
Tuberculosis rates per 1,000 population												
(*a*) Primary notifications—												
Respiratory	—	0·77	0·787	0·678	1·19	0·77	0·65	0·66	1·327	0·88	1·04	1·065
Non-respiratory	—	0·12	0·066	0·082	0·14	0·04	0·08	0·068	0·125	0·08	0·22	0·092
(*b*) Deaths—Respiratory	0·09	0·12	0·080	0·071	0·083	0·15	0·09	0·096	0·16	0·14	0·127	0·118
Non-respiratory	0·01	0·01	0·010	0·011	0·012	0·01	0·01	0·007	0·007	0·02	0·003	0·006
Death rates per 1,000 population from—												
Cancer (all forms including Leukaemia and Aleukaemia)	2·09	2·20	2·282	2·08	1·94	2·08	2·10	2·09	2·08	2·21	2·36	2·015
Cancer of Lungs and Bronchus	0·426	0·49	0·453	0·44	0·47	0·54	0·47	0·41	0·58	0·58	0·53	0·476
Meningococcal infections	—	0·01	0·007	0·00	0·008	—	0·002	—	0·001	0·007	0·003	—
Whooping Cough	—	0·00	0·000	0·00	0·004	—	0·002	0·0036	0·003	0·003	—	—
Influenza	—	0·14	0·153	0·17	0·147	0·18	0·09	0·13	0·16	0·17	0·105	0·179
Measles	—	—	0·000	—	—	—	0·01	—	0·001	0·007	—	0·006
Acute Poliomyelitis and Encephalitis	—	0·01	0·014	0·00	0·004	—	—	0·011	0·003	0·001	—	—
Diarrhoea (under 2 years)	—	0·01	0·028	0·01	0·008	0·013	0·004	0·0036	0·01	0·004	0·003	0·006
Diarrhoea (under 2 years) (per 1,000 live births)	—	0·26	1·605	0·43	0·44	0·7	0·24	0·226	0·499	0·024	0·2	0·365

The summary compiled by tho Medical Officer of Health of Liverpool is printed here with his permission, with a column added for England and Wales.

V—NOTIFIABLE DISEASES

Foreword

The incidence of notifiable diseases, with the number admitted to Hospital during the year 1957 is shown in the following table :—

Disease	Number Notified	Notified Cases admitted to Hospital
Scarlet Fever	173	22
Whooping Cough	587	37
Diphtheria	—	—
Measles	4,816	172
Acute Pneumonia	348	27
Meningococcal Infection	7	2
Paralytic Acute Poliomyelitis	12	12
Non-Paralytic Acute Poliomyelitis	1	1
Acute Encephalitis (Infective)	—	—
Acute Encephalitis (post infectious)	—	—
Dysentery	23	17
Ophthalmia Neonatorum	4	—
Puerperal Pyrexia	51	—
Para-Typhoid Fever	—	—
Typhoid Fever	—	—
Food Poisoning	13	10
Erysipelas	31	4
Malaria	1	—

Comments on the Prevalence and Control of Infectious Diseases

Scarlet Fever.—There were 173 notifications, slightly lower than the preceding year, but within the average over a number of years. The sex distribution was 81 males and 92 females. Only 22 patients were removed to the Isolation Hospital. There were no deaths.

Whooping Cough.—During the year, 587 cases of Whooping Cough were notified. Of these 34 were admitted to the Isolation Hospital. There was one death.

The incidence was heaviest in the first quarter, with 482 notifications, and the quarterly number of cases after that period was as follows :—Second quarter, 63 ; Third quarter, 18 ; Fourth quarter, 24. The sex relationship of the cases was about equal, 279 males and 308 females.

Notifications of Whooping Cough by age and sex, 1948-1957

Year	Under 1 year		1–2 years		2–3 years		3–4 years		4–5 years		5–10 years		10–15 years		15 yrs. and over		Total Sexes		Totals
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1948	47	28	38	47	36	40	23	59	32	63	41	67	–	3	3	4	220	311	531
1949	51	43	50	66	68	87	64	66	52	53	111	90	4	7	1	3	401	415	816
1950	59	52	57	51	64	73	70	87	60	98	83	108	2	3	4	6	399	478	877
1951	79	65	90	86	105	92	106	123	118	99	127	138	3	7	6	23	634	633	1,267
1952	25	30	21	25	36	35	36	25	28	29	58	54	1	2	1	2	206	202	408
1953	72	45	68	54	73	67	63	71	79	99	160	206	1	4	1	7	517	553	1,070
1954	25	33	25	19	34	38	22	36	31	36	77	85	1	2	–	3	215	252	467
1955	6	13	3	6	9	12	6	11	5	10	13	16	1	–	–	1	43	69	112
1956	30	41	16	15	30	28	33	35	41	40	122	121	6	9	–	3	278	292	570
1957	34	44	19	29	25	33	33	31	36	40	123	111	8	10	1	10	279	308	587

The percentage of the total cases in age groups up to 10 years illustrates the shift to the right in age incidence. This is illustrated by the following table :—

Percentage of total cases shown in Age Groups, 1948-1957

Year	Under 1 year	1–2 years	2–3 years	3–4 years	4–5 years	5–10 years
	%	%	%	%	%	%
1948	14·1	16·0	14·3	15·4	18·3	20·3
1949	11·4	14·2	19·0	16·0	12·8	24·6
1950	12·6	12·3	15·6	17·9	18·0	12·2
1951	11·3	13·1	15·5	18·0	17·3	20·9
1952	13·5	11·3	17·4	14·9	14·0	27·4
1953	10·9	11·4	13·9	12·5	16·6	34·2
1954	12·4	9·4	15·5	12·4	14·3	35·3
1955	16·9	8·0	18·8	15·2	13·4	25·9
1956	10·7	5·4	10·2	12·0	14·2	42·6
1957	13·7	8·2	9·9	10·9	12·9	39·9

Diphtheria

There were no cases during the year.

Measles.—The number of cases of measles notified during the period was 4,816. During the year 172 cases were admitted to the Isolation Hospital.

The cases notified for the past 5 years are :—

1953—1,837 ; 1954—33 ; 1955—6,869 ; 1956—122 ; 1957—4816

Pneumonia.—The notified cases totalled 348 and this was higher than the preceding year. Twenty-seven of the notified cases were removed to the Isolation Hospital ; many more were admitted to general hospitals in and around Cardiff. Deaths cannot be correlated with the notifications because the Registrar General's heading " Pneumonia " covers deaths from all types of pneumonia.

The age and sex distribution of the cases for 1957 are shown below :—

0–1 year		1–2 years		2–3 years		3–4 years		4–5 years		5–10 years		10–20 years		20–45 years		45–65 years		65 yrs. & over		Total Sexes		Grand Total
M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
7	4	6	6	4	6	4	5	4	3	20	16	12	11	36	35	56	41	31	41	180	168	348

The cases notified for the past 5 years are :—

1953—232 ; 1954—191 ; 1955—265 ; 1956—242 ; 1957—348

Meningococcal Infection.—Seven cases were notified during the year. Of these, two were admitted to the Isolation Hospital. The total number of cases with a tentative diagnosis of meningococcal infection admitted to the Hospital was 59. There were two deaths, both females under one year old.

The age and sex distribution of the cases were as follows :—

0–1 year		1–2 years		2–3 years		3–4 years		4–5 years		5–10 years		10–20 years		20–45 years		45–65 years		65 yrs. & over		Total Sexes		Grand Total
M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
–	3	–	–	–	–	–	1	–	1	–	–	–	–	1	–	–	1	–	–	1	6	7

The number of cases for the past 5 years was as follows :—

1953—10 ; 1954—15 ; 1955—14 ; 1956—7 ; 1957—7

Acute Poliomyelitis (Paralytic and Non-paralytic).—The number of cases occurring in the City was 13. This was below the average for the past five years. Twelve were of the paralytic type and the other was non-paralytic. There was one death.

The number of cases and dates when they occurred are set out in the table below :—

	WEEK ENDING										
	Jan. 5	Mar. 23	May 18	June 1	June 20	July 6	Aug. 3	Aug. 10	Sept. 28	Oct. 12	Total
Paralytic	1	1	2	1	1	1	2	1	1	1	12
Non-Paralytic ..								1			1

All the cases were fully investigated and there appeared to be no connection with any known cases.

The age and sex distribution of the cases were as follows :—

	Under 1 year		1–2 years		2–3 years		3–4 years		25–35 years		35–45 years		45–65 years		All Ages Total		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Paralytic	1	–	2	1	–	–	–	3	2	1	–	1	–	1	5	7	12
Non-paralytic	–	–	1	–	–	–	–	–	–	–	–	–	–	–	1	–	1

The sites of paralysis in the 12 cases notified as Paralytic were as follows :—

Left leg—2 ; Right leg—3 ; Both legs—2 ; Left arm—1 ; Right arm—1 ; Pharynx—1 ; Neck—1 ; Polio Encephalitis—1.

The number of admissions to the Isolation Hospital was 28, but of these, only 12 were diagnosed as poliomyelitis ; one other case admitted as meningitis was diagnosed finally as non-paralytic poliomyelitis.

The case and sex distribution for the past five years are set out in the following table.

Year	Under 1 yr.		1–3 years		3–5 years		5–10 years		10–15 years		15–25 years		25–35 years		35–45 years		45–65 years		65 yrs. & over		Total Sexes		Grand Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1953	–	–	3	3	3	3	3	4	1	2	–	2	2	2	1	–	1	–	–	–	14	16	30
1954	–	–	1	1	–	1	4	5	1	–	–	2	1	–	–	1	–	–	–	–	7	10	17
1955	1	–	3	3	3	3	4	7	4	1	2	1	2	4	–	–	–	–	–	–	19	19	38
1956	–	–	1	–	1	2	1	3	1	3	1	1	1	1	–	1	–	–	–	–	6	11	17
1957	1	–	3	1	–	3	–	–	–	–	–	–	2	1	–	1	–	1	–	–	6	7	13

Encephalitis, Infective.—No cases were notified during the year.

The number of cases notified during the past five years was as follows :—

1953—1 ; 1954—nil ; 1955—nil ; 1956—3 ; 1957—nil.

Encephalitis, Post-Infective.—No cases were notified during the year.

The number of cases notified during the past five years was as follows :—

1953—nil ; 1954—3 ; 1955—1 ; 1956—2 ; 1957—nil.

Erysipelas.—Out of the 31 cases notified, 4 were removed to the Isolation Hospital. It is not known whether any deaths occurred from this disease as they are not classified separately in the Registrar's returns.

During the past five years the number of cases notified was as follows :—

1953—51 ; 1954—35 ; 1955—37 ; 1956—48 ; 1957—31.

Gastro Intestinal Infections

Typhoid Fever.—No cases occurred during the year.

Paratyphoid Fever.—No cases occurred during the year.

The number of cases notified during the past five years was as follows :—

1953—3 ; 1954—89 ; 1955—8 ; 1956—1 ; 1957—nil.

Dysentery.—During the year 23 cases of dysentery were notified, this being 92 less than in the previous year. All were of Shigelle Sonnei type. Children under 10 years accounted for 14 cases. There were 17 admissions to the Isolation Hospital ; 11 of these during the week ending 28th December were all admitted from Green Farm Hostel. No cases occurred at the Ely Children's Homes (with the exception of a child admitted from Green Farm Hostel) or the Nursery Schools.

Routine swabbing of new admissions to the Ely Children's Homes and Green Farm Hostel has been carried out for some time with much success. The prompt measures adopted are responsible, no doubt, for the lower incidence this year. No chemo-prophylaxis treatment was resorted to during this period.

The number of cases notified during the past five years was as follows :—

1953—22 ; 1954—229 ; 1955—296 ; 1956—115 ; 1957—23

Food Poisoning.—There were 13 cases notified, and except for one outbreak (in which only three cases were notified out of the 19 people affected), all the others were single cases.

The causative organism was identified in 6 of the single cases and was as follows :—Salmonella Typhimurium, 5 ; Salmonella newport, 1.

The outbreak occurred amongst 80 persons attending two civic luncheons at the City Hall, Cardiff. Those affected (19 people) became ill approximately three hours after eating lunch. The degree of illness varied ; six cases were badly collapsed and required hospital treatment. The others were moderately or slightly ill. The duration of illness was about 24 hours.

Specimens of all foods consumed and patients' vomit were submitted for laboratory examination together with nose and throat swabs from the kitchen staff. The swabs from one member of the staff showed a growth of Staphylococcus Aureus (Coagulase Positive)—Not typable. In addition the liquor from one 6 lb. 12 oz. tin of processed peas showed a moderate growth of Staphylococcus Aureus (Coagulase Positive) Type RTDX 1000/6/7/42E/47/53/54/70/75+ and it was decided that the peas had been the probable cause of the outbreak.

The particulars in the table below are set out in the manner prescribed by the Ministry of Health :—

ANNUAL RETURN OF FOOD POISONING NOTIFICATIONS (Corrected)
CARDIFF COUNTY BOROUGH. YEAR—1957

Food Poisoning Notifications (Corrected) Returned to Registrar General.

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
1	3	5	4	13

Outbreaks due to Identified Agents

Total outbreaks 1 Total cases 3

Outbreaks due to :—

(*a*) Chemical Poisons	—
(*b*) Salmonella Organisms	—
(*c*) Staphylococci (including toxin)	1
(*d*) Cl. Botulinum	—
(*e*) Other bacteria	—

Outbreaks of Undiscovered Cause

Total Outbreaks .. Nil Total Cases Nil

Single Cases

Agent identified 6 Unknown Cause .. 4 Total 10

The number of cases of food poisoning notified during the past five years was as follows :— 1953—29 ; 1954—21 ; 1955—47 ; 1956—27 ; 1957—13

CITY ISOLATION HOSPITAL

The total number of patients admitted to the Cardiff Isolation Hospital was 1,013. Of these, 762 were residents of the City. In the following table the Cardiff cases are classified as " disease on admission " and " disease as diagnosed in hospital " :—

	Disease on admission	*Disease as diagnosed in hospital*
Diphtheria	5	—
Scarlet Fever	26	22
Whooping Cough	35	37
Pneumonia	46—1 Port Case	26—1 Port Case
Poliomyelitis (Paralytic)	10	12
(Non-paralytic)	28	1
Measles	177	172
Meningitis	59	13
Tuberculosis	4	4
Encephalitis Acute Infective	1	—
Encephalitis Post Infectious	1	—
Dysentery	33	17
Paratyphoid Fever	3	—
Typhoid Fever	2+1 Port Case	—
Erysipelas	4	4
Chicken Pox	11+3 Port Cases	9+2 Port Cases
Food Poisoning	9	10
Glandular Fever	15	23
Miscellaneous	283+1 Port Case	402+3 Port Cases
Miscellaneous Hospital Staff	4	4

Total number of patients admitted—1,013
Total number of patients normally resident in Cardiff—762
Number of patients residents outside Cardiff—251

CLASSIFICATION BY AGE AND SEX OF INFECTIOUS DISEASES CASES FOR YEAR 1957

Diseases	Under 1 year		1–2 years		2–3 years		3–4 years		4–5 years		5–10 years		10–15 years		15–20 years		20–25 years		25–35 years		35–45 years		45–65 years		65 years and over		All Ages		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
Scarlet Fever	1	–	–	2	9	8	9	17	7	17	41	38	13	8	–	1	–	–	–	–	–	–	–	1	–	–	81	92	173
Whooping Cough	34	44	19	29	25	33	33	31	36	40	123	111	8	10	–	1	–	3	–	1	1	1	–	2	–	2	279	308	587
Diphtheria	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Measles	99	116	273	245	335	320	341	376	383	369	992	912	19	12	3	6	–	4	1	5	–	2	–	2	–	1	2,456	2,360	4,816
Acute Pneumonia	7	4	6	6	4	6	4	5	4	3	20	16	7	6	5	5	9	6	12	15	15	14	56	41	31	41	180	168	348
Meningococcal Infection	–	3	–	–	–	–	–	1	–	1	–	–	–	–	–	–	–	–	–	–	1	–	–	1	–	–	1	6	7
Paralytic Acute Poliomyletis	1	–	2	1	–	–	–	3	–	–	–	–	–	–	–	–	–	–	2	1	–	1	–	1	–	–	5	7	12
Non-Paralytic Acute Poliomyletis	–	–	–	–	1	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	1	–	1
Acute Encephalitis Infective	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Acute Encephalitis Post Infectious	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Dysentery	1	1	–	–	2	4	1	1	–	2	–	2	2	–	–	1	–	1	2	2	–	–	–	–	1	–	9	14	23
Ophthalmia Neonatorum	2	2	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	2	2	4
Puerperal Pyrexia	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	6	–	21	–	15	–	9	–	–	–	–	–	51	51
Small Pox	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Para-Typhoid Fever	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Enteric or Typhoid (Exc. Para-typhoid)	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Erysipelas	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	1	–	–	–	4	3	8	12	2	1	15	16	31
Malaria – Contracted in this Country	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Malaria – Contracted Abroad	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	1	–	–	–	–	–	–	–	–	–	1	–	1
Malaria – Induced	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Food Poisoning	–	–	–	–	1	2	–	–	–	–	–	1	1	1	–	–	–	–	1	–	1	–	–	3	–	2	4	9	13
Typhus Fever	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Tuberculosis—Respiratory	–	2	1	2	1	–	1	–	2	1	4	2	6	7	9	14	11	23	29	38	19	28	62	22	11	4	156	143	299
Tuberculosis—Meninges	–	–	–	–	–	–	–	–	–	–	–	1	–	–	–	–	–	–	–	–	–	–	–	–	–	–	1	1	2
Tuberculosis—Others	–	–	–	1	–	–	–	–	–	–	–	3	3	1	–	2	2	2	3	6	1	1	1	2	1	3	11	21	32

CASES OF ACUTE INFECTIOUS DISEASES NOTIFIED IN MUNICIPAL WARDS AND CASES REMOVED TO CARDIFF ISOLATION HOSPITAL PERIOD—YEAR 1957

Municipal Wards	Scarlet Fever	Whooping Cough	Measles	Acute Poliomyelitis		Diphtheria	Menigococcal Infection	Acute Encephalitis		Dysentery	Ophthalmia Neonatorum	Puerperal Pyrexia	Pneumonia	Para typhoid Fever	Typhoid Fever	Food Poisoning	Erysipelas	Malaria	Tuberculosis		
				Paralytic	Non-Paralytic			Infective	Post Infective										Respiratory	Meninges	Others
Central	7	16	111	—	—	—	1	—	—	—	—	1	13	—	—	—	—	—	9	—	—
South	4	32	181	—	—	—	1	—	—	1	—	—	48	—	—	—	1	—	23	—	2
Cathays	3	34	204	—	—	—	—	—	—	—	1	—	25	—	—	—	1	—	16	—	5
Adamsdown ..	9	20	198	—	—	—	—	—	—	—	—	—	25	—	—	—	1	—	22	—	3
Riverside ..	8	24	140	1	—	—	1	—	—	1	—	—	8	—	—	1	1	—	25	—	—
Canton	9	22	276	1	—	—	—	—	—	—	—	—	10	—	—	—	2	—	24	—	2
Grangetown ..	5	22	186	2	—	—	—	—	—	—	—	—	17	—	—	2	2	1	11	—	3
Roath	27	97	991	1	—	—	1	—	—	5	1	—	56	—	—	3	2	—	36	1	3
Plasnewydd ..	3	14	182	1	—	—	—	—	—	—	—	1	16	—	—	—	—	—	11	—	2
Splott	17	39	290	2	—	—	—	—	—	—	—	1	22	—	—	—	2	—	27	1	1
Penylan	14	49	434	1	—	—	—	—	—	1	—	1	33	—	—	1	2	—	12	—	2
Llandaff	17	60	397	1	—	—	—	—	—	1	1	—	17	—	—	1	4	—	24	—	1
Gabalfa	17	103	421	2	1	—	1	—	—	—	—	—	30	—	—	2	7	—	20	—	4
Ely	31	54	786	—	—	—	1	—	—	2	—	1	27	—	—	1	6	—	38	—	4
Institutions ..	2	1	19	—	—	—	2	—	—	12	1	46	1	—	—	2	—	—	1	—	—
TOTALS	173	587	4,816	12	1	—	7	—	—	23	4	51	348	—	—	13	31	1	299	2	32
Cases removed to Isolation Hospital	22	37	—	12	1	—	1	—	—	17	—	—	27	—	—	10	4	—	—	—	—

VI—TUBERCULOSIS

A. H. GRIFFITH, M.B., B.S., D.P.H., Senior Medical Officer

It is generally regarded that the proper application of modern preventive measures and new methods of treatment will eventually relegate tuberculosis to a position now occupied by diphtheria and other once prevalent infectious diseases. New methods of treatment, applied during the last ten years, have resulted in the annual number of deaths from tuberculosis in Cardiff falling from 160 in 1942–1949 to 20 in 1957. Modern treatment has eased considerably the demand on hospital beds by reducing the period of hospitalisation and allowing many patients to receive treatment at home. These are the dramatic effects of new therapeutic methods, but the effects of modern control measures are considerably less spectacular, and will not be obvious for a few years.

Table III shows that the incidence of new cases of tuberculosis in Cardiff remains high. On the other hand there are fewer sources of infection at large in the community. Tuberculin testing of school children shows a reduction every year in the proportion of 13-year-old children found previously infected by tubercle bacilli, thereby indicating that the risk of being infected is decreasing.

If tuberculosis is to be eradicated the full co-operation of the public is required. More than 1 per cent of the total population of Cardiff have their names on our tuberculosis register as suffering from the disease. More than half of these are fit and well, the disease is in an arrested condition and they attend the Chest Clinic for periodical examinations as required. In a quarter of the cases the disease is still active and they are receiving modern-drug therapy at home. A further tenth of the total number of tuberculosis cases are in hospital whilst the rest are unco-operative cases who refuse treatment or supervision. These 300 unco-operative cases can be divided into three equal groups—those with arrested lesions, those with chronic lesions which cannot be readily and effectively treated, and those with active lesions which would probably respond to the treatment offered. Many of these unco-operative cases may be disseminating the disease and in spite of warnings and advice they refuse to co-operate for their own benefit and for the well being of their families, friends and the general public.

The Welsh Regional Hospital Board's Mass Radiography Unit continued to make use of the Department's information on where undiagnosed sources of infection were likely to be found by mass radiography surveys. Co-operation between the Chest Clinic and the Public Health Department remained excellent, a factor which will have a beneficial effect in reducing future tuberculosis morbidity rates. The follow-up of new cases, investigations into possible sources of infection and the search for secondary cases arising from the newly found ones were on the same lines as indicated in the 1956 Annual Report. Child contacts of tuberculosis cases were again offered B.C.G. vaccination as a means of conferring added protection against the disease.

Table I. B.C.G. VACCINATION WORK, 1950 TO 1957

	1950 AND 1951	1952	1953	1954	1955	1956	1957
CONTACT SCHEME							
Number of contacts attending clinics	—	754	1,334	1,021	1,174	1,287	1,458
Number of contacts given B.C.G. Vaccination	127	283	617	468	431	607	849
Number of contacts found Mantoux Positive	—	117	186	159	121	138	139
Number of contacts given annual skin tests after B.C.G. ..	86	109	315	481	615	145	894
Number of contacts re-vaccinated	10	18	45	19	11	10	3
Number of others given B.C.G. (Nurses, Medical Students, etc.)	92	19	89	105	298	225	147
Number of contacts from outside Cardiff given B.C.G. ..	8	16	19	32	44	36	51
Number of home visits made by B.C.G. Health Visitors ..	—	617	825	764	693	1,082	1,156
Number of re-visits made by B.C.G. Health Visitors ..	—	293	667	871	932	1,001	997
Number of new-born babies given B.C.G. at St. David's Hospital	—	76	90	127	130	118	126
SCHOOLCHILDREN SCHEME							
Number offered B.C.G. ..	—	—	403	5,010	4,746	2,910	3,490
Number tuberculin skin tested ..	—	—	364	4,147	3,643	2,247	2,881
Number found tuberculin negative	—	—	255	3,016	2,790	1,787	2,410
Number given B.C.G.	—	—	186	2,876	2,653	1,757	2,410

II. Statistical Review for 1957

(a) Deaths

There were fewer deaths from pulmonary tuberculosis in Cardiff during 1957 than during any other year on record. Indeed, in 1957 the death rate from pulmonary tuberculosis was lower in Cardiff than in England and Wales for the first time. Tables II, III and IV give an indication of the extent to which pulmonary tuberculosis has declined as a common cause of death.

There were only 3 deaths from non-pulmonary tuberculosis. One was a male infant aged 1, who had tuberculous meningitis, one was a male aged 65+ who had tuberculosis of the genito-urinary system and the third was a female aged 75+ who died of tuberculosis of the bones and joints.

Table II. Showing the Pulmonary Tuberculosis Fatality Rates in Cardiff for the last 9 years

	1949	1950	1951	1952	1953	1954	1955	1956	1957
Number of deaths from pulmonary tuberculosis	155	112	105	80	72	75	46	36	20
Number of new notifications of pulmonary tuberculosis ..	376	304	324	284	329	258	222	294	299
Percentage :— Deaths/notifications	*41*	*37*	*32*	*28*	*22*	*29*	*21*	*12*	*7*

Table III

Showing the decline in the Annual Death Rates from Tuberculosis in Cardiff and in England and Wales during the last 60 years

Year	Number of Deaths from pulmonary tuberculosis in Cardiff	Death Rate per annum for 100,000 Population		
		Cardiff		England and Wales
		Pulmonary Tuberculosis	Non-pulmonary Tuberculosis	Pulmonary Tuberculosis
1894	227	152	96	138
1934	205	93	22	65
1944	144	67	12	52
1954	75	30	2	16
1955	46	18	1	13
1956	36	14	0·4	11
1957	20	8	1·2	9·5

Table IV

Giving the Annual number of Deaths from Pulmonary Tuberculosis in Age Groups

Number of Deaths Annually from Pulmonary Tuberculosis

Age Groups	1935	1945	1955	1956	1957
0–14 ..	7	7	0	0	0
15–24 ..	55	31	1	0	0
25–34 ..	43	32	12	2	1
35–44 ..	49	37	4	4	3
45–54 ..	29	31	9	5	6
55–64 ..	25	25	8	16	6
65 and over ..	8	15	12	9	4
	279	241	46	36	20

Table V **Giving Deaths from Pulmonary Tuberculosis in Cardiff during 1957 according to age and sex**

Number of Deaths from Pulmonary Tuberculosis

Age Groups	Males	Females	Total
Under 24 ..	0	0	0
25–34	0	1	1
35–44	1	2	3
45–54	3	3	6
55–64	3	3	6
65+	3	1	4

(b) Notifications

On 31st December, 1957, there were 2,755 cases of pulmonary tuberculosis and 213 cases of non-pulmonary tuberculosis on our registers, representing over 1 per cent of the total population in Cardiff.

Table VI Giving the number of cases of Tuberculosis on the Register in Cardiff on the 31st December, 1956 and 1957

	Pulmonary Tuberculosis			Non-Pulmonary Tuberculosis		
	Males	Females	Total	Males	Females	Total
Number of cases on the register 31/12/56 ..	1,430	1,223	2,653	179	213	392
Number removed during 1957 through deaths ..	26	13	39	2	3	5
Number of cases previously lost sight of but now known to be dead ..	—	—	—	—	—	—
Number removed during 1957 through leaving Cardiff to live elsewhere	48	40	88	4	6	10
Number removed during 1957 as " recovery " cases	65	58	123	19	19	38
Number of cases lost sight of	11	5	16	2	1	3
Number of newly notified cases during 1957 ..	156	143	299	12	22	34
Number of known cases who came from outside to live in Cardiff	43	26	69	6	4	10
Number of cases on the register 31/12/57 ..	1,479	1,276	2,755	170	213	383

Table VII Giving the annual number of new notifications of Pulmonary Tuberculosis in Cardiff

Year	1935	1936	1945	1946	1953	1954	1955	1956	1957
Number of new notifications ..	289	305	345	417	329	258	222	294	299

Table VIII Giving the numbers of new cases of Tuberculosis during 1957 by Age and Sex

NUMBER OF NEW CASES

Age Groups	Pulmonary Tuberculosis			Non-Pulmonary Tuberculosis		
	Males	Females	Total	Males	Females	Total
Under 1 ..	—	2	2	1	—	1
1–4	5	3	8	—	1	1
5–9	4	2	6	—	4	4
10–14	6	7	13	3	1	4
15–19	9	15	24	—	2	2
20–24	11	22	33	2	2	4
25–34	29	38	67	3	6	9
35–44	19	28	47	1	1	2
45–54	35	14	49	1	1	2
55–64	27	8	35	—	1	1
65+	11	4	15	1	3	4
TOTAL ..	156	143	299	12	22	34

Table VIII includes only the newly notified cases living in Cardiff during 1957. In addition, known cases of tuberculosis living outside the City moved into Cardiff during the year. Details regarding their age and sex are given in Table IX.

Table IX — **Giving the Age and Sex of Transfers into Cardiff during 1957 and included in Table X**

NUMBER OF CASES

Age Groups	Pulmonary Tuberculosis			Non-Pulmonary Tuberculosis		
	Males	Females	Total	Males	Females	Total
Under 1 ..	—	—	—	—	—	—
1–4	1	—	1	—	—	—
5–9	—	1	1	—	—	—
10–14	1	—	1	—	1	1
15–19	1	2	3	—	—	—
20–24	8	8	16	2	1	3
25–34	9	7	16	2	2	4
35–44	10	6	16	1	—	1
45–54	6	2	8	1	—	1
55–64	6	—	6	—	—	—
65+	1	—	1	—	—	—
TOTAL ..	43	26	69	6	4	10

One death from pulmonary tuberculosis and one from non-pulmonary tuberculosis which had not been notified prior to death, are not included in the tables above.

Table X

Sources of ascertainment of New Cases of Pulmonary Tuberculosis

Sources of Ascertainment	1955	1956	1957
General Medical Practitioners ..	114	93	63
General Practitioners X-ray Sessions	35	93	88
Hospitals	43	39	35
Mass Radiography Service	10	34	56
National Service Recruits	2	3	—
H.M. Forces	2	1	7
Examination of Contacts	13	30	31
Ante-natal Clinic		1	—
Other Sources	—	—	19
TOTAL ..	222	294	299

Table XI

New Cases of Non-Pulmonary Tuberculosis by Sex and Localisation of the Disease

Site of Infection	1935		1945		1955		1956			
	M	F	M	F	M	F	M	F	M	F
Nervous System ..	5	17	3	1	3	1	3	2	1	1
Intestines and Peritoneum ..	2	7	2	5	1	–	–	3	1	2
Vertebral Column ..	5	6	4	6	4	2	5	–	2	–
Bones and Joints ..	19	2	6	2	6	4	2	1	–	2
Cervical Glands	24	39	24	29	3	10	5	6	2	11
Kidneys ..					–	3	–	–	2	1
Other Organs ..					6	3	3	1	4	5

VII—NATIONAL HEALTH SERVICE ACTS, 1946–1952

CARE OF MOTHERS AND YOUNG CHILDREN

Live-births and Still-births—Sources of Notification

The following statement shows the number of live-births and still-births notified as having occurred in Cardiff during 1957, according to the source of notification :—

Notified by :—	*Live-births*	*Still-births*	*Total*
Municipal Midwives	821	5	826
Midwives of the Cardiff District Nursing Association ..	1,065	11	1,076
Private Midwives (Domiciliary) ..	1	—	1
Private Midwives (Nursing Homes)	438	3	441
Parents	2	—	2
Maternity Hospitals :—			
(*a*) Cardiff Maternity Hospital	1,616	64	1,680
(*b*) St. David's Hospital ..	1,663	52	1,715
	5,606	135	5,741

Notifications in respect of children born to residents of other Authorities were as shown :—

Notified by :—	*Live-births*	*Still-births*	*Total*
Municipal Midwives	4	—	4
Midwives of the Cardiff District Nursing Association ..	7	—	7
Private Midwives (Domiciliary) ..	—	—	—
Private Midwives (Nursing Homes)	185	—	185
Parents	—	—	—
Maternity Hospitals :—			
(*a*) Cardiff Maternity Hospital	460	29	489
(*b*) St. David's Hospital ..	384	12	396
	1,040	41	1,081

Transferred notifications of Cardiff cases were 51. Thus, after allowing for all transferred notifications, the number of Cardiff births notified was 4,711 and this figure was made up as follows :—

	Live-births	*Still-births*	*Totals*
Domiciliary	1,885	16	1,901
Institutional	2,730	80	2,810
			4,711

Child Welfare and Ante-Natal Clinics

(*a*) Child Welfare Centres

The total number of sessions held at Child Welfare Centres was 1,365, the average attendance at each being 39, and the total number of attendances was 53,385. The number of children who first attended during the year who at their first attendance were under 1 year of age was 3,603. The total number of children who attended during the year was 6,218.

(*b*) Ante-Natal Clinics

During the year the integration of the ante-natal services provided by Municipal Midwives and the Midwives employed by the Cardiff District Nursing Association was effected and attendances of expectant mothers at sessions staffed by the latter are accordingly included. This accounts for the increase in the figures in this report over those for previous years.

The number of sessions held was 1,100, the average attendance at each session being 14. The total number of attendances was 15,550. The number of women who attended for the first time was 3,520 and the total number of women who attended during the year was 4,200.

The number of expectant mothers who attended the ante-natal clinics for the first time during the year is shown in relation to the number of notified births (live and still) belonging to Cardiff as follows :—

(i) Total number of notified births belonging to Cardiff, 4,711.

(ii) The number of expectant mothers who attended the ante-natal clinics for the first time, 3,520.

(iii) Percentage of notified births represented by (ii), 74·7.

Blood testing for the Wassermann Reaction was continued. The number of specimens submitted was 2,512, all of which were found negative.

(*c*) Special Clinic for Mothers and Young Children

Following is a record of the work carried out at the clinic, showing the number of cases seen for the first time and the total number of attendances during the year :—

Syphilis	—
Gonorrhoea	—
Other Conditions requiring treatment ..	122
Conditions not requiring treatment ..	21
	143
Total Attendances ..	550



FAIRWATER CLINIC — OPENED FEBRUARY, 1957

Deaths ascribed to Pregnancy or Childbirth

There were three deaths ascribed to pregnancy or childbirth in respect of women in the area. Two occurred in hospital and the other at home. The causes of death were :—

1. Shock due to spontaneous rupture of the uterus during parturition. Bronchial pneumonia and diabetes mellitus.
2. Acute bronchial pneumonia due to inhalation of intestinal contents during anaesthesia for instrumental delivery of a full-term child. Pre-eclamptic toxaemia of pregnancy.
3. Pulmonary embolism due to post partum thrombosis of the pelvic and leg veins.

Infectious Diseases

The following cases were notified during the year :—

	Domiciliary Confinements	*Institutional Confinements*
Ophthalmia Neonatorum ..	3	1
Pemphigus Neonatorum ..	—	—
Puerperal Pyrexia	6	45

All the Ophthalmia Neonatorum cases cleared up, with no impairment of vision.

Birth Control

The number of cases referred to the Cardiff Mothers' Advisory Clinic on medical grounds, for advice as to further pregnancies, was 15.

Nose and Throat Defects

	Children under School Age
Number examined for the first time ..	305
Received operative treatment in hospital ..	90
Received other forms of treatment at clinic ..	32
Total attendances at clinic	522

Visual Defects

Attended clinic for the first time ..	714
Examined for errors of refraction	415*
Spectacles prescribed	258*

* Including cases first examined in and carried over from 1956.

Maternity Outfits

Maternity outfits are made available in all cases of home confinements, where necessary. The number supplied during the year was 2,134.

Domestic Help

Notes on this service are included in the appropriate section of the report, but it is recorded here that the number of instances in which domestic help was provided for cases of confinement during the year was 130.

Care of Illegitimate Children

The admission to the Salvation Army Home (Northlands), of unmarried expectant mothers was arranged in 15 instances during 1957. The Authority accepted financial responsibility for 15 cases. Arrangements were also made for 3 cases to be admitted to the Salvation Army Home at Bristol, these cases being approved transfers from " Northlands " Home in special circumstances.

Care of Premature Infants

Special visits are made in the case of premature babies born at home, 1,876 such visits having been made during the year. The scheme for following-up the premature babies on discharge from hospital is described in the reports for 1949 (page 22), and 1953 (page 33)

Statistics relating to prematurity (after correction for transfers) are shown in the following tables :—

Number of Premature Live-births notified :—

(*a*)	In hospital	215
(*b*)	At home	103
(*c*)	In private nursing homes ..	6
	TOTAL ..	324

Number of Premature Still-births Notified :—

(*a*)	In hospital	46
(*b*)	At home	10
(*c*)	In private nursing homes ..	1
	TOTAL ..	57

Weight at birth	PREMATURE LIVE BIRTHS															PREMATURE STILL-BIRTHS		
	Born in hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
3 lb. 4 oz. or less ..	32	14	10	2	1	1	7	2	4	—	—	—	—	—	—	25	1	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	42	4	34	5	—	4	2	—	2	—	—	—	—	—	—	14	3	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	51	—	49	14	—	13	1	—	—	2	—	2	—	—	—	5	1	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	90	—	90	70	1	69	2	1	1	4	—	4	—	—	—	2	5	1
TOTALS ..	215	18	183	91	2	87	12	3	7	6	—	6	—	—	—	46	10	1

Maternity Homes

At 31st December, 9 Nursing Homes remained on the Register, 3 having accommodation for maternity cases. The number of beds provided for maternity cases was 29.

Other accommodation for maternity cases is provided in two local General Hospitals, viz., the Cardiff Maternity Hospital and St. David's Hospital. St. David's Hospital and Cardiff Maternity Hospital are approved for Part I of the Midwifery Training, and recognised also for the training in gas and air analgesia.

Nurseries and Child Minders' Regulation Act, 1948

Number of premises registered at 31st December, 1957 ..	4
Number of children provided for	137
Number of Registered Daily Minders at 31st December, 1957	2
Number of children provided for	36

Home Visitation

A summary of the work carried out by Health Visitors is as follows :—

Births—First Visits		4,182
Births and Infant Deaths—combined visits		34
Still-birth investigations		81
Infant death investigations		67
Routine re-visits of children—Under 1 year		13,822
	Over 1 and under 2 years	8,788
	Over 2 but under 5 years	27,421
Ante-natal	First visits ..	1,013
	re-visits	349
Post-natal	First visits ..	3,682
	re-visits	1,098
Ophthalmia Neonatorum	First visits ..	4
	re-visits	17
Immunisation	First visits ..	3,776
	re-visits	1,244
Vaccination	First visits ..	3,607
	re-visits	923
B.C.G.	First visits ..	1,156
	re-visits	997
Whooping Cough ..	First visits ..	2,857
	re-visits	897
Cardiac visits	First visits ..	140
	re-visits	586
Premature infants ..	First visits ..	201
	re-visits	1,675
Nutritional	First visits ..	90
	re-visits	128
Paediatric	First visits ..	782
	re-visits	1,002
Diabetic	First visits ..	121
	re-visits	529
Gastric	First visits ..	28
	re-visits	14
Tuberculosis	First visits ..	57
	re-visits	6,162

Asthma	First visits	117
	re-visits	102
Special V.D.	First visits	19
	re-visits	51
Mental Deficiency	First visits	79
	re-visits	2,340
Mental Health	First visits	87
	re-visits	452
Geriatric	First visits	492
	re-visits	1,164
Home Help Cases		39
Problem Families	First visits	52
	re-visits	868
Clinic visits		840
Ineffectual visits		9,537
Other unclassified visits		3,426
		108,365

DENTAL TREATMENT, 1957

REPORT OF Mr. H. V. NEWCOMBE, L.D.S., R.C.S.

(Principal School Dental Officer Designate)

The following is a record of all forms of dental treatment carried out during 1957 in connection with maternity and child welfare, i.e., expectant and nursing mothers and young children.

	Expectant Mothers	Nursing Mothers	Pre-School Children	Total
(a) *Numbers provided with dental care :*				
Referred for treatment by M.O.s	522	577	948	2,047
Attended for inspection	409	496	902	1,807
Found to be in need of treatment	397	485	867	1,749
Treated for first time	315	386	733	1,434
Made dentally fit	213	427	727	1,367
Attendances for treatment	929	2,129	1,039	4,097
(b) *Treatment provided :*				
Teeth filled	254	541	155	950
Teeth extracted	747	1,713	1,455	3,915
Silver Nitrate treatment	8	1	29	38
Dressings	63	92	92	247
Scalings with gum treatment	126	149	7	282
Scalings	57	73	10	140
Extractions under local anaesthetic	133	341	28	502
Administrations of general anaesthetics	232	349	672	1,253
Crowns and Inlays	—	—	—	—
Mothers supplied with dentures	81	288	—	369
(c) *Dentures supplied :*				
Full upper	35	162	—	197
Partial upper	53	121	—	174
Full lower	24	113	—	137
Partial lower	22	61	—	83

Number of sessions—478.

Radiographs—10.

As mentioned in the current Report on the School Dental Service, we sustained a grievous loss during the year in the death of Mr. W. A. Sutherland, L.D.S., R.C.S., who devoted so many years, indeed a lifetime of valuable service, to the Department in his capacity as Assistant, and latterly, as Principal School Dental Officer.

Turning to the dental work performed during the year, this, allowing for some expected contraction in volume, follows, in general, the pattern of the preceding year. There were, however, certain items of treatment which showed certain deviations from this pattern, as indicated below :—

Denture Work.—The total number of patients receiving dentures was 369 as against 379 in 1956, whilst the total of dentures supplied were 591 and 568 respectively. In the case of Nursing Mothers treated, 65·2% were fitted with dentures compared with 60·9% last year, but for Expectant Mothers the percentage was approximately the same in either year.

Extractions.—The number of extractions performed under local anaesthesia was almost doubled at 502, although the overall total (local plus general) fell by 154 to 4,417.

Fillings.—These exceeded the previous year's total by 85 and there was a slight, though welcome improvement in the extraction/filling ratio.

Dental Anaesthesia.—Consequent on the very successful lecture given by Professor W. W. Mushin of the Department of Anaesthesia of the Welsh National School of Medicine, on the subject "Anaesthesia in Dental Surgery," attention was drawn in last year's Annual Report to the probability of this being followed up by a practical demonstration. It is with pleasure, therefore, that I record the meeting that was held at the Central Clinic, Richmond Road, where Dr. L. Rendell-Baker gave a clinical demonstration of the uses and value of vinesthene and trilene in dentistry, the latter with special reference to the safety factor involved in using a higher percentage of oxygen when anaesthetising the expectant mother. The meeting was very well attended by both medical and dental officers on the staff and its success may be gauged by the fact that anaesthetic apparatus similar to that used at the demonstration has now been introduced generally into all the Authority's dental clinics and has been acclaimed by the medical officers responsible for the giving of dental anaesthetics in these clinics.

New Clinics.—In the Ministry of Health Memorandum on Dental Services Provided by Local Authorities circulated by the Welsh Board of Health—Circular 11/55 (Wales), it is recommended in paragraph 5 that " within the stringent limit of capital expenditure available, some priority should be given to the provision of further clinics."

I have to report that a new clinic, including a Dental Department, is in course of construction at Rumney and will serve chiefly the vast new Llanrumney Housing estate. This Clinic is estimated to be in operation by the Autumn of 1958, while the Dental Department will be utilised in a full-time capacity. This provision is in addition to the new School Clinics at Fairwater and Llanishen which are referred to in the report on the School Dental Service.

In the favourable circumstances outlined above, it is regrettable that we are faced—at least from the Dental aspect—with the ever present " bogey " of understaffing. It is stated in the Ministry of Health Memorandum (para. 5) already referred to, that " consideration could be given to the introduction of evening sessions in place of, or as well as morning or afternoon sessions. Full-time Dental Officers should be paid sessional fees if they are willing to undertake such additional work, provided always the amount of work expected is not excessive. This system has been used with success by a few Authorities and it has been found that mothers welcome this opportunity of attending for treatment when the father is usually able to look after the children. Implementation of such a policy may also, it is suggested, go some way towards encouraging recruitment to the School Health Service.

MIDWIFERY SERVICE

At the end of the year the midwives practising in the area were as shown :—

(*a*) **Institutional**

(i) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act, 1946 .. 61

(ii) Midwives employed in Nursing Homes .. 9

(*b*) **Domiciliary**

(i) Midwives employed by the Authority .. 17

(ii) Midwives employed by voluntary organisations under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946 6

(iii) Midwives in private practice 1

Deliveries attended by midwives during the year were as follows :—

	Domiciliary Cases					
	Doctor not booked		Doctor booked			
(1(	Doctor present at time of delivery of child (2)	Doctor not present at time of delivery of child (3)	Doctor present at time of delivery of child (either the booked Doctor or another) (4)	Doctor not present at time of delivery of child (5)	Totals (6)	Cases in institutions (7)
(*a*) **Midwives employed by the Authority**	1	18	53	751	823	—
(*b*) **Midwives employed by Voluntary Organisations :—** (i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946	3	14	68	987	1,072	—
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	—	—	—	—	—	—
(*c*) **Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act** ..	—	—	—	—	—	3,313
(*d*) **Midwives in Private Practice (including Midwives employed in Nursing Homes)**	—	—	2	—	2	338
TOTALS ..	4	32	123	1,738	1,897	3,651

(This table relates to women delivered, not, in the case of multiple births, to infants)

Medical Aid under Section 14 (1) of the Midwives Act, 1951

The number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1951, by a midwife :—

(*a*) **For Domiciliary cases**	
(i) Where the medical practitioner had arranged to provide the patient with maternity medical services under the National Health Service ..	6
(ii) Others	3
(*b*) **For cases in Institutions**	—

Administration of Gas and Air Analgesia by Domiciliary Midwives

This section of the report relates only to those midwives employed directly by the Local Health Authority (referred to as municipal midwives), and those midwives employed in the public midwifery service under Section 23 by voluntary organisations as agents of the Local Health Authority (referred to as midwives of the Cardiff District Nursing Association).

(*a*) *Midwives qualified to administer analgesia*

At 31st December, 1957, all municipal midwives were qualified in the administration of gas and air analgesia, and the six practising midwives of the Cardiff District Nursing Association were similarly qualified.

(*b*) *Possession of apparatus*

At the end of 1957 the municipal midwives possessed seventeen sets of the necessary apparatus for the administration of analgesia, and seven sets of apparatus were available for the use of the midwives of the Cardiff District Nursing Association.

(*c*) *Administration during the year*

The total administrations, total confinements and resulting percentages of administrations to confinements were as follows :—

	Total Administrations	*Total Confinements*	*Percentage*
Municipal Midwives	595	826	72·03
Midwives of the Cardiff District Nursing Association ..	806	1,076	74·97
Combined Total ..	1,401	1,902	73·66

(d) Development of gas and air analgesia since 1947.

Year	*Total Administrations*	*Total Confinements*	*Percentage*
1947* ..	395	2,197	13·43
1948	1,085	2,113	51·35
1949	1,294	2,111	61·29
1950	1,314	1,996	65·83
1951	1,324	1,903	69·57
1952	1,404	1,951	71·96
1953	1,449	1,986	72·96
1954	1,628	2,148	75·79
1955	1,424	1,878	75·83
1956	1,351	1,914	70·59
1957 ..	1,401	1,902	73·66

* Commenced in June.

Institutional Midwives qualified to administer gas and air analgesia

The number of institutional midwives in practice at the end of the year qualified to administer inhalational analgesia in accordance with the requirements of the Central Midwives' Board :—

(*a*) Employed in hospitals in the National Health Service 61

(*b*) Employed in private nursing homes 7

Pethidine

The number of cases in which pethidine was administered by midwives in domiciliary practice during the year, was as follows :—

	When doctor was not present at time of delivery of child	*When doctor was present at time of delivery of child*	*Total*
Municipal Midwives ..	401	25	426
Midwives of the Cardiff District Nursing Association ..	263	29	292
TOTAL ..	664	54	718

Transport

At the end of the year motor car allowances were being paid to 11 midwives using their cars in connection with the service.

Supervision

Officers of the Department made 138 visits of inspection of midwives.

HEALTH VISITING

At the end of the year the staff consisted of the Superintendent, Deputy Superintendent and 50 Health Visitors (one half-time), there being two vacancies. Forty-two Health Visitors were engaged on the full range of duties which include general health visiting, school nursing, tuberculosis visiting, mental deficiency visiting and care of the aged. The remainder were undertaking particular duties which had been assigned to them and which include the hospital follow-up schemes, care of premature infants, liaison with the Chest Clinic, B.C.G. vaccination, immunisation and mental health work.

HOME NURSING

At the end of 1957 the nursing staff consisted of 28 whole-time State Registered Nurses (including one male) and three half-time, making a total equivalent of 29½. In addition there were three student Home Nurses (equivalent to two whole-time nurses) and one State Enrolled Assistant Nurse. Eleven student nurses completed the training during the year. Whilst the staff situation remains satisfactory, vacancies being filled as they occurred without having to advertise, increasing demands on the service will necessitate an increase in the establishment.

The usual facilities for observing the work of the domiciliary nursing service were afforded to students undertaking Courses at the Welsh National School of Medicine and the Cardiff Royal Infirmary.

The special need for a laundry service in the City for incontinent patients nursed at home has already been recogniseed and negotiations with the Cardiff Hospital Management Committee with a view to using the laundry at one of the local hospitals are going on. It is, however, quite certain that such a service will be provided in the coming year.

Pressure on the home help service affects the needs of elderly sick patients who at present cannot claim a high degree of priority, and the allocation of a number of home helps for these patients would greatly assist the nursing service.

There is no doubt that the home nursing service relieves the pressure on hospital beds but the extent is difficult to estimate as so much depends upon the type of illness and the facilities for his care in the patient's home.

A summary of new cases, visits, etc. during 1957, is as follows :—

Number of New Cases	3,684
Cases Carried Over from 1956	811
Total	4,495

Classification of Cases and Visits

	Cases	*Visits*
Medical	3,626	105,720
Surgical	624	17,423
Infectious Diseases ..	13	50
Tuberculosis	231	19,181
Maternal Complications ..	1	2
Others	—	—
	4,495	142,376

Sources from which Cases were Referred

General Practitioners	4,245
Hospital	86
Public Health Department—School Health Service Maternal & Child Welfare	31
Miscellaneous	133

Analysis of Diseases and Disorders Requiring Treatment or Attention

Disease or Condition	Cases	Visits
Cancer	251	10,045
Heart and Circulatory	501	17,704
Repiratory	275	2,656
Diabetes	126	23,009
Tuberculosis—General	5	775
Streptomycin	226	18,406
Eye Diseases	1	63
Rheumatism	1	6
Rheumatoid Arthritis	59	4,024
Infectious Diseases	13	50
Children	412	2,685
Maternity Cases	1	2
Senility	152	7,194
Cerebral Haemorrhage	175	9,578
Anaemia	320	10,568
Gynaecological	141	1,945
Parkinsonism	12	351
Arterio and Disseminated Sclerosis	13	789
Fractures	29	760
Enemas and Rectal Washouts	555	1,412
Spastics	—	—
Other Injections	500	3,404
Miscellaneous	103	9,527
Surgical Cases	624	17,423
	4,495	142,376

VACCINATION AND IMMUNISATION SECTION

Vaccination against Smallpox.—The total number vaccinated against smallpox was 2,881. This figure shows a further increase over that of 1956 and is the highest since 1951. Continual propaganda has helped in keeping vaccination in the public eye and, in addition, the importance of vaccination is continually stressed by medical officers and health visitors. Within a month of the birth of a child its parents are sent a notice reminding them of the desirability as well as the necessity of having their child vaccinated. The notice, as well as stressing the danger of smallpox being brought into this country from abroad, also reminds parents that vaccination often becomes necessary in later life and by having the child vaccinated in infancy any subsequent vaccination which may be necessary will be less severe.

Genera1 practitioners have continued to co-operate successfully in the vaccination scheme. During the year they performed 44·2 per cent of the total vaccinations. In the case of primary vaccination, general practitioners performed 35 per cent of the total, but in the case of re-vaccinations 88·3 per cent were performed by them. Most of the latter were persons over the age of 15 years who were requiring vaccination before going abroad. General practitioners receive a fee of five shillings for each record of a successful vaccination or re-vaccination submitted to the local authority.

For comparison with previous years the table overleaf gives details of primary and re-vaccinations since 1950. To this is added a column showing the primary vaccination of infants under one year, expressed as a percentage of the births for each year, but obviously as the treatment is not carried out before the child is two months old, the vaccinations for any particular year cannot be strictly related to the births for the same year. Nevertheless this is the most satisfactory method of indicating the scale of vaccinations each year and is used by the Ministry of Health.

Vaccination against Smallpox

Year	Primary Vaccinations		Re-vaccinations	Births	Percentage of Vaccinations under 1 year to Birth
	Under 1 year	All Ages	All Ages		
1950 ..	1,684	1,936	414	4,402	38·3
1951 ..	1,767	2,156	911	4,234	41·7
1952 ..	1,819	2,133	435	4,351	41·8
1953 ..	1,752	2,024	291	4,421	39·6
1954 ..	1,709	2,016	367	4,320	39·6
1955 ..	1,745	1,957	341	4,187	41·7
1956 ..	1,918	2,166	390	4,467	42·9
1957 ..	1,980	2,360	521	4,595	43·1

The figures issued by the Welsh Board of Health for 1955 and 1956 show that the percentage of vaccinations for Cardiff was only exceeded in Wales by Merionethshire and Caernarvonshire, which in 1956 vaccinated 44·6 and 56·6 per cent of children under one year respectively. The percentage in 1956 for Wales as a whole was 26·3 per cent and for England and Wales it was 38·5 per cent whilst Cardiff was 42·9 per cent.

In the following table, vaccinations and re-vaccinations are shown in separate age groups and the work done by general practitioners is also indicated :—

Primary Vaccinations	*By Public Health Dept.*	*By Private Practitioners*	*Total*
Under 1 year	1,461	519	1,980
1 to 2 years	18	60	78
2 to 4 years	21	50	71
5 to 14 years	18	48	66
15 years and over	28	137	165
Totals ..	1,546	814	2,360
Insusceptible	20	15	35

Revaccinations	*By Public Health Dept.*	*By Private Practitioners*	*Total*
Under 1 year	—	—	—
1 to 2 years	—	—	—
2 to 4 years	1	17	18
5 to 14 years	4	59	63
15 years and over	57	383	440
Totals ..	62	459	521

No case of post-vaccinal encephalitis was reported during the year.

Diphtheria Immunisation

Although there was one case of diphtheria in Cardiff in the previous year (and this did not receive a great amount of publicity) it still remains difficult to persuade parents to have their children immunised. Only active propaganda carried out by the health visitors and supported by the appointment system and following-up of each child has enabled the rate of immunisation to be kept at such a high level in Cardiff. Additional factors have also been that in Cardiff a child can be given the combined whooping-cough and diphtheria antigen, and parents are sent a letter reminding them of this fact before their child is two months old. The work of the Mobile Unit has also been of the utmost importance in giving parents living in the new housing estates the opportunity of having their children immunised. Of course, as new clinics are built on these estates the work of the Mobile Unit may decline, although there is always a hard core of parents who will not bring their children to the clinics for immunisation.

During the year, 3,669 received primary protective treatment. The number of children immunised by private practitioners was 427, an increase of 27 on last year, An interesting fact is that each year an average of 250 children are reported by the health visitors as being immunised by private practitioners, but no records of these are received by the department. In addition there were 213 definite refusals and 50 children whose parents refused to complete the treatment after only one injection.

Following are the details of where and by whom children were immunised :—

Special Clinics for combined Diphtheria and Pertussis immunisation ..	1,413
Mobile Units for nurse visiting the home	891
Infant Welfare Clinics	882
Schools	56
Private practitioners	427
	3,669

Children immunised against diphtheria only numbered 275.

The return now required by the Ministry of Health follows. In this return no child is shown as being immunised unless he has received a primary immunisation or booster dose within five years.

Number of children at the 31st December, 1957, who had completed a course of immunisation before that date (i.e. at any time since 1st January, 1942)

Age on 31st December, 1957 (i.e., born in year)	Under 1 year 1957	1–4 1956–1953	5–9 1952–1948	10–14 1947–1943	Total under 15 years
A Last complete course of injections (whether primary or booster) 1953–1957 ..	902	13,800	13,429	14,335	42,466
B 1952 or earlier ..			7,947	6,138	14,085
C Estimated mid-year child population	4,420	16,780	40,300		61,500
Immunity Index 100 A/C ..	20·4%	82·2%	68·9%		69·1%

In 1956 the immunity index figure was 70·5 per cent and figures have been issued by the Ministry of Health for England and Wales for that year. The immunity index for Wales was 44·5 per cent and for England 49·2 per cent. In Wales only Anglesey with an index of 73·5 per cent was higher than Cardiff.

Apart from the primary immunisation, other work in connection with diphtheria immunisation is summarised as follows :—

Number given Booster doses—	
1–4 years	43
5–14 years	1,019
Number posterior Schick negative—	
5–14 years	2,311
Number posterior Schick positive—	
5–14 years	77

PROTECTION AGAINST WHOOPING COUGH

There were 587 notifications of whooping cough during the year and of these 37 were admitted to the Cardiff Isolation Hospital. There was one death, a child of nineteen months.

The incidence was very high during the first quarter when 482 cases were notified and it decreased considerably in the second quarter when only 63 cases were notified, and during the second six months only 42 cases were notified. The sex relationship of the cases was roughly equal, 279 males and 308 females.

Notifications of Whooping Cough by age and sex, 1947-57

Year	Under 1 year		1–2 years		2–3 years		3–4 years		4–5 years		5–10 years		10–15 years		15 yrs. and over		Total Sexes		Totals
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1947	19	25	25	25	20	26	25	28	29	26	31	38	2	1	–	1	151	170	321
1948	47	28	38	47	36	40	23	59	32	63	41	67	–	3	3	4	220	311	531
1949	51	43	50	66	68	87	64	66	52	53	111	90	4	7	1	3	401	415	816
1950	59	52	57	51	64	73	70	87	60	98	83	108	2	3	4	6	399	478	877
1951	79	65	90	86	105	92	106	123	118	99	127	138	3	7	6	23	634	633	1,267
1952	25	30	21	25	36	35	36	25	28	29	58	54	1	2	1	2	206	202	408
1953	72	45	68	54	73	67	63	71	79	99	160	206	1	4	1	7	517	553	1,070
1954	25	33	25	19	34	38	22	36	31	36	77	85	1	2	–	3	215	252	467
1955	6	13	3	6	9	12	6	11	5	10	13	16	1	–	–	1	43	69	112
1956	30	41	16	15	30	28	33	35	41	40	122	121	6	9	–	3	278	292	570
1957	34	44	19	29	25	33	33	31	36	40	123	111	8	10	1	10	279	308	587

The percentage of the total cases in age groups up to ten years illustrates the higher incidence in older children as shown by the following table. It is interesting to note nevertheless that the highest incidence is in children under one year (13·3%) although children between five and six years form 16·3 per cent of the total cases. This latter figure is included in the 5–10 years age group but is not shown in the table.

Percentage of total cases shown in Age Groups, 1947-57

Year	Under 1 year	1–2 years	2–3 years	3–4 years	4–5 years	5–10 years
	%	%	%	%	%	%
1947	13·7	15·6	14·3	16·5	17·5	21·2
1948	14·1	16·0	14·3	15·4	18·3	20·3
1949	11·4	14·2	19·0	16·0	12·8	24·6
1950	12·6	12·3	15·6	17·9	18·0	12·2
1951	11·3	13·1	15·5	18·0	17·3	20·9
1952	13·5	11·3	17·4	14·9	14·0	27·4
1953	10·9	11·4	13·9	12·5	16·6	34·2
1954	12·4	9·4	15·5	12·4	14·3	35·3
1955	16·9	8·0	18·8	15·2	13·4	25·9
1956	10·7	5·4	10·2	12·0	14·2	42·6
1957	13·3	8·2	10·0	10·9	13·0	39·9

In the following tables are given the births for the years 1951–57, the number of children in age groups who have received protective treatment and the percentage of children in the different age groups who have been protected against whooping cough. The figures for the different age groups of those treated in 1951 and 1952 are not available. Treatment at that time was carried out by the Medical Research Council and these details were not kept.

Children Protected against Whooping Cough

Year	No. of Births	Number Protected					Total
		Under 1 year	1–2 years	2–3 years	3–4 years	4–5 years	
1951	4,327	—	—	—	—	—	2,000
1952	4,351	—	—	—	—	—	2,000
1953	4,421	1,377	437	111	48	19	1,992
1954	4,492	2,425	766	138	68	16	3,413
1955	4,187	2,483	921	49	20	11	3,483
1956	4,467	2,987	763	48	23	16	3,837
1957	4,595	2,699	633	42	12	6	3,392

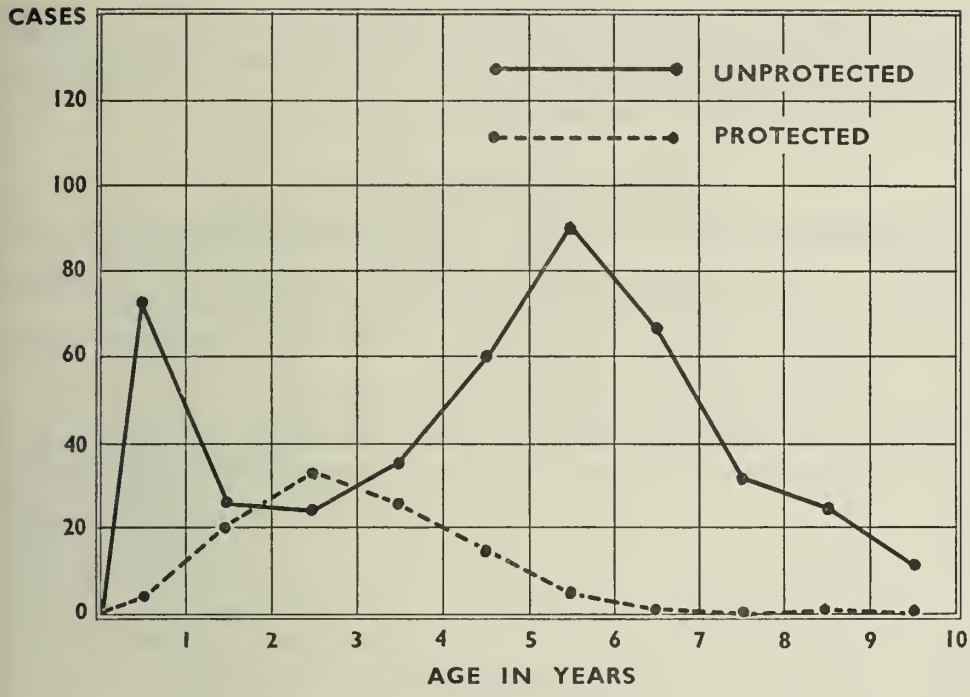
Percentage of Children of the different age groups protected against Whooping Cough

Year	Under 1 year	1–2 years	2–3 years	3–4 years	4–5 * years
	%	%	%	%	%
1953	31·1	10·0	2·6	*	*
1954	54·6	48·5	10·9	4·1	*
1955	59·3	74·5	49·6	13·7	*
1956	66·8	75·1	75·6	50·1	*
1957	58·8	81·0	78·5	75·8	50·2

* Figures not available. See note to previous table.

Age and Sex of Cases of Whooping Cough which occurred in the Protected Group in 1957

Year Combined or Whooping Cough Vaccine was given	Under 1 yr.		1–2 years		2–3 years		3–4 years		4–5 years		5–6 years		6–7 years		7–8 years		8–9 years		9–10 years		10–15 years		15–25 years		25–35 years		35–45 years		Total		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
1957	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2		
1956	2	2	8	9	3	6	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	13	18	31		
1955	—	—	1	1	15	5	6	6	2	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	25	12	37		
1954	—	—	—	—	1	3	11	4	5	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17	11	28		
1953	—	—	—	—	—	—	—	—	2	3	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	5	9		
1952	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	1		
1951	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Total ..	2	2	10	11	19	14	17	10	9	7	2	3	1	—	—	—	1	—	—	—	—	—	—	—	—	—	61	47	108		



The general picture of whooping cough morbidity in the protected and unprotected groups shows little change from the previous year and continues to show that the incidence is substantially lower in the protected group of children up to five years and quite low in the five to six years age group, although the highest incidence of unprotected children is in this age group. It is noted that in the two to three years age group 57 per cent of the cases notified had been protected against whooping cough. Nevertheless it appears that the scheme for protection against whooping cough is beginning to have the desired effect.

POLIOMYELITIS VACCINATION

Owing to the shortage of vaccine in 1956 it had only been possible to vaccinate 1,846 children out of the 17,395 children who were registered for vaccination in March, 1956. This year when vaccine had become more plentiful it was possible to vaccinate 13,341 children with two injections and 300 with one injection.

In May, the Ministry of Health announced that it would be possible to extend the scheme and include all children born in 1955 and 1956 and also children born between 1947 and 1954 inclusive who had not hitherto been registered. Parents of children born in 1955 and 1956 were circulated by post, offering vaccination for their children and parents of the older children were informed through the press and by notices displayed in clinics of the second opportunity to register their children. About 50 per cent of parents of children born in 1955 and 1956 consented to their children being vaccinated and these children were duly registered.

Due to the shortage of vaccine it was not possible to start the programme of vaccination until March, but as the Ministry of Health decided that vaccination could be continued during the Summer months the programme was maintained throughout the rest of the year. Nevertheless there were periods of up to a month when vaccine was not available. In all 252 special clinics for poliomyelitis vaccination were held in the various clinics during the 30 weeks in which polio clinics were held. A medical officer, a health visitor and a clerk were required for each clinic and an average of 100 injections were given at each clinic.

By the end of the year therefore, although only 15,187 children had been vaccinated with two injections out of the original 17,395 who had registered, every child had received at least one appointment to attend a clinic. In fact, several hundred of the 1955 and 1956 groups of children were completely vaccinated by the end of the year. The following table gives details of the different age groups of the vaccinated children :—

POLIOMYELITIS VACCINATION

Year of Vaccination	Year of Birth										Total
	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	
1956	212	167	212	174	293	277	266	245	—	—	1,846
1957	2,299	2,127	1,884	1,836	1,271	1,269	1,264	1,169	136	86	13,341
Total ..	2,511	2,294	2,096	2,010	1,564	1,546	1,530	1,414	136	86	15,187

B.C.G. VACCINATION

The following tables give details of work done with regard to B.C.G. vaccination of child contacts of cases of tuberculosis and 13-year-old schoolchildren.

Table I. B.C.G. VACCINATION WORK, 1950 TO 1957

	1950 and 1951	1952	1953	1954	1955	1956	1957
Number of contacts attending clinics	—	754	1,334	1,021	1,174	1,287	1,458
Number of contacts given B.C.G. Vaccination	127	283	617	468	431	607	849
Number of contacts found Mantoux Positive	—	117	186	159	121	138	139
Number of contacts given annual skin tests after B.C.G. ..	86	109	315	481	615	145	894
Number of contacts re-vaccinated	10	18	45	19	11	10	3
Number of others given B.C.G. (Nurses, Medical Students, etc.)	92	19	89	105	298	225	147
Number of contacts from outside Cardiff given B.C.G.	8	16	19	32	44	36	51
Number of home visits made by B.C.G. Health Visitors ..	—	617	825	764	693	1,082	1,156
Number of re-visits made by B.C.G. Health Visitors ..	—	293	667	871	932	1,001	997
Number of new-born babies given B.C.G. at St. David's Hospital	—	76	90	127	130	118	126
SCHOOLS							
Number offered B.C.G.	—	—	406	5,010	4,746	2,910	3,490
Number tuberculin skin tested	—	—	364	4,147	3,643	2,247	2,881
Number found tuberculin negative	—	—	255	3,016	2,790	1,787	2,410
Number given B.C.G.	—	—	186	2,876	2,653	1,757	2,410

Table II. **The proportion of Tuberculin Positive Reactors among 13-year-olds between 1954 and 1957**

Year	13-year-old Children		Percentage found Positive
	Tested	Positive	
1954 ..	1,173	282	24
1955 ..	1,885	352	24
1956 ..	1,919	360	22
1957 ..	2,504	426	18

Table III. **Details of Children Tuberculin Tested and given B.C.G. in Schools during 1957 and 1956**

	Age of Children				Total	1956
	12 years	13 years	14 years	15+ years		
Number of children offered B.C.G.	16	3,109	328	47	3,490	2,910
Number of refusals		605	14		619	663
Number of children tested ..	16	2,504	314	47	2,881	2,247
Number of positive reactors ..		426	45		471	490
Number given B.C.G. ..	16	2,078	269	47	2,410	1,757

Table IV. **Details of Post B.C.G. Tuberculin Tests carried out during 1957**

Year B.C.G. given	Tuberculin Tested 1957	Definitely Positive	Per cent Positive	Doubtful Positive	Tuberculin Negative	Number Re-vaccinated
1954	223	223	100·0	—	—	—
1955	643	639	97·8	4	—	—
1956	1,233	1,196	97·0	27	10	4

AMBULANCE SERVICE

Analysis of Journeys, 1st January—31st December, 1957

	Journeys	*Patients*	*Mileage*
(*a*) **Patient-Carrying :**			
Emergency	2,678	2,733	19,679
Accident	1,402	1,550	6,736
Outpatients	13,686	36,587	101,690
Others	12,543	15,859	98,017
(*b*) **Occupation and Training Centre :** ..	385	3,736	4,448
	30,694	60,465	230,570
(*c*) Abortive and service journeys	1,060		6,451
(*d*) Transporting of Midwives, apparatus, etc. ..	1,274		11,032
Totals	33,028	60,465	248,053
Totals for the year 1956 ..	(32,529)	(60,047)	(260,540)
Stretcher cases included in above ..		16,166	89,485
Sitting cases included in above		44,299	141,085
		60,465	230,570

Average mileage per journey 7·51
Average mileage per patient 4·10

Prevention of Illness, Care and After-Care

The after-care schemes introduced by the authority, all of which have been described in detail in previous reports, continued to operate during the year, and some indication of the attention given to them by the health visitors is gained on reference to the summary of home visits on page 24.

Tuberculosis.—There are at present some 3,000 names on the register. The majority of these persons have quiescent lesions but require periodical examinations. Large numbers (about 40 per cent) are receiving chemotherapy at home, about 5 per cent are in hospital and about 15 per cent are refusing treatment and further supervision from the Chest Clinic.

The aim of tuberculosis visiting by the health visitors is to ensure that all sources of infection connected with the notified case have been discovered and to ensure that all preventive action is being taken to prevent the spread of infection in that household. On her first visit to a house she is therefore obliged to seek out the possible sources of infection or secondary cases by arranging for all members of the household to attend the Chest Clinic for x-ray examination. She also has to ensure that the resistance of child contacts to infection is improved if possible by attending clinics for tuberculin testing and the administration of B.C.G. to the tuberculin negative. Lastly she has to consider what alterations are required in the patient's working and living conditions so as to enhance his speed of recovery and to decrease the risk of infecting others. Further periodical visits are made for the same purpose. In addition it is the duty of the preventative health services to ensure that the notified case accepts and complies with the treatment prescribed by the specialists at the diagnostic-cum-treatment centre. Health visitors must therefore know which of her cases are non-co-operative, who are sputum positive, which household contacts have been x-rayed, who has had B.C.G. and what are the living and working conditions of her patients.

The Health Visitor is supplied with information regularly from the Chest Clinic via the two Liaison Health Visitors who work there. This information states briefly when the patient last attended the clinic, the state of the tuberculosis lesion, the treatment prescribed and when the patient is required to visit the clinic again. The highly specialised B.C.G. Health Visitors provide the Health Visitors with the names of child contacts who have had the B.C.G. vaccine and those who are tuberculin positive. The Health Visitor visiting the home of a tuberculous person is therefore adequately equipped with relevant information.

One difficulty a visiting Health Visitor experiences in this work is that of keeping relevant information in an easily assimilated form so that she can see at a glance what work remains unaccomplished and what problems remain unresolved. She must, therefore, have some record system which will enable her to determine quickly what problems have to be concentrated on next. An efficient system can save her many hours of delving through sheaves of reports and allow her to spend that time in effective field work.

The scheme for tuberculosis health visiting and record keeping, referred to in the report for 1956, is given here in greater detail. The notes are, actually, a shortened version of the article by Mr. P. H. Williams mentioned in the list of publications following the preface of this report.

The record system devised for the Tuberculosis care and after-care Service comprises only two simple sets of records, namely, the Health Visitors' Folders and the Central Office Index. To achieve simplicity and yet to provide an effective system, it is necessary to decide precisely what records are required and the purposes to which they will be put. The record system must provide (1) a complete Central Register of all cases in the area of the Authority ; (2) a folder for each Health Visitor containing an up-to-date summary of

every case in her area, with space for follow-up reports ; (3) a classification of the cases both in the Central Register and the Health Visitors' Folders in such a way that outstanding problems requiring attention always show up ; (4) rapid and efficient periodical reviews of all cases so that proper supervision and direction of the efforts of Health Visitors and other agencies are possible ; (5) up-to-date information on the clinical aspect of each case, as supplied by Chest Clinics and Hospitals ; (6) up-to-date information on the environmental conditions of each case ; (7) statistics for periodic and special reports in an easily assessable manner ; (8) the minimum number of clerical operations without sacrificing efficiency.

In addition, the Records must be in such a form that they are easily understood by medical, nursing and clerical staffs, who will be required to make use of them. These conditions have been complied with in the system which is now in operation and which is now described.

Health Visitors' Folders.—The Health Visitors' Folders are strongly constructed and open like a book to give two rows of case record cards with visible indexes, all hung on a metal frame. The capacity is limited to 78 records to each folder. The record card is a special card reprint of the standardised environmental report form, which is the basis of the information collected by the Department. The card is so folded that the top half does not cover the last line at the bottom of the card where the full name, date of birth and address of the person to whom the card refers are entered. A perspex holder is fitted over this index line and coloured removable signals are inserted into the holder. Respiratory cases are distinguished by using buff cards, whereas green cards are used for all other forms of Tuberculosis. The card has two punch holes in the folding line for the insertion of a metallic cord which holds it in the folder. A continuation sheet is inserted in each card for subsequent reports which are made in summarised form. The cases in the Health Visitors' Folders correspond with the Central Index Register which is maintained in the Records Section of the Department. The responsibility for altering both records remains with the clerk concerned. The cards are filed in the folders in alphabetical street order, so that where a number of Tuberculosis patients reside in the same household, or in the same immediate neighbourhood, they will be grouped together.

The procedure adopted upon receipt of each notification of Tuberculosis, or upon the patient taking up residence from another area of the City, or from outside the City is as follows :—

The central record clerk prepares a record card for each new case when it is notified and issues it to the Health Visitor concerned. After the case has been visited the Health Vistior returns the record card forthwith for her report to be considered by the Medical Officer of Health. This procedure applies even though another patient may already have been notified as suffering from Tuberculosis in the same household. When the report has been considered and any necessary action taken, the record clerk inserts the record, with its perspex protector, in the appropriate place in the Health Visitor's Folder.

Information received from the Chest Physician, or from Hospitals, is dealt with in the following manner. The diagnosis, in accordance with the code in use, and the recommendation regarding treatment, are notified by the Chest Physician in his weekly report and are entered on the record by the records clerk. Further information relating to treatment and attendances at the Chest Clinic is entered, from time to time, by the Liaison Health Visitor, who is a Local Health Authority health visitor at the Chest Clinic.

The record of attendances of contacts, together with the results of tests and x-rays, are submitted by the Health Visitor attending each Contact Clinic and a copy of each list is sent to each district Health Clinic. Health Visitors note the attendances and results on the appropriate records in their folders.

The two Liaison Health Visitors are responsible for reviewing periodically the district Health Vistiors' reports on home visits and forwarding any relevant information to the Chest Physician. A Medical Officer also examines the Health Visitors' Folders at least once a year and inserts comments on the preventative work still outstanding in each case.

All patients who have not attended during the year are considered by the Chest Physician during his annual review of the Register and are referred, as he considers appropriate, for special follow-up by Health Visitors.

The record clerk in the Central Office removes from the folders the records of all cases notified as now recovered and those who have moved from the City to live elsewhere. Health Visitors do not remove records from the folders but submit details of removals coming to their notice, for confirmation to be obtained before the clerk removes the records.

Coloured signals are inserted in the perspex holders at the bottom of each card to indicate various aspects of preventative work which are either incomplete or unsatisfactory. There are three columns for signals and they are used to indicate in this negative manner the following :—

(1) **Signals in the first column** indicate some incomplete or unsatisfactory aspects regarding the patient himself.

(2) **Signals in the middle column** indicate incomplete or unsatisfactory aspects regarding the contacts.

(3) **Signals in the right hand column** indicate that the environment is unsatisfactory.

Health Visitors remove or replace signals as the conditions relative to the case vary. No coloured signals on a case record card indicates that the patient is receiving treatment or periodical examination, the contacts have been x-rayed and, if necessary, received B.C.G. vaccination, and the home and working conditions are satisfactory.

Central Office Index

The central register is in the form of a strip index on 24 double sided panels, which will provide for the indexing of up to 5,000 cases. The panels show cases notified in the areas of the City to which the Health Visitors' Folders refer. Each strip provides four lines of information in respect of a case and, being movable within the panel, allows for the insertion of new cases as the index develops. Each panel has two columns of indexes on each side and the columns are covered with perspex sheets to protect the strips.

The index is classified in various sections as follows with the cases in each section arranged in strict alphabetical order.

(1) Patients notified in the current year.

(2) Current patients previously notified.

(3) Cases removed from the register as recovered.

(4) Deceased persons.

(5) Persons who have moved from Cardiff.

(6) Persons whose whereabouts are unknown.

Particulars Recorded on the Index

(1) Area and District Number.
Chest Clinic reference number.

(2) Name, date of birth, address and subsequent address (if any).

(3) Date and by whom notified. (A transferred notification is indicated.)
Diagnoses in code and if sputum is positive.

(4) Whether patient is in hospital.
Whether patient is attending Clinic regularly.

(5) Occupation.
Home conditions—Good, Fair or Bad.

(6) Date that all known contacts were last x-rayed.
Whether B.C.G. of contacts is necessary and date completed.

The introduction of the Index is being made in two stages. (1) All new cases notified from 1st January, 1957, are recorded in the Index in a separate section for the current year. (2) All current cases in the Health Visitors' Folders are being recorded in the Index. This list of cases will be checked against the current tuberculosis Index Register and any cases not accounted for will be verified and added to the Index in the appropriate section of the classification, or removed as duplicates.

The existing Form "A" Register and the Index Register will be maintained for one year during the change-over period and until the new Index has been completely checked with these existing Registers.

A series of coloured signals has been devised for use with the Index and these are inserted in the appropriate columns for—

Positive sputum.

Patient is in Hospital.

Patient is not attending Clinic regularly.

Unsatisfac tory housing.

Contacts not x-rayed.

Contacts—B.C.G. not completed.

Amendments to the Central Index will be made in order to keep the information recorded up-to-date. Significant changes reported upon by Health Visitors will be noted by the Liaison Health Visitors in order that the records clerk may make the necessary amendments. Similarly significant information provided by the Chest Physician, particularly of patients referred for special follow-up, will be noted on the index by the Clerk.

The advantages of the Central Index in this form are two-fold (a) a review can be made at any time of the progress of preventive measures in relation to the new cases in the preceding year and (b) a black list of selected cases is readily available from the signalling system, so that special and concerted attention may be paid to them by both the Chest Physician and the Medical Officer of Health and his staff.

Spastics.—It is difficult to state accurately the number of spastics residing in the area but the numbers of known cases are as follows :—

(a)	Children of school age	77
(b)	Children under school age	24
(c)	Adolescents and adults	79

The figure in (a) is reasonably accurate as particular interest in the spastic problem in Cardiff has been shown and there is a central register of cases. The figure for (b) is undoubtedly incomplete and an underestimate, and a figure of 40 would probably be more correct. Under (c) the number is also probably an underestimate as a recent survey by health visitors, midwives, home nurses and general practitioners brought to light quite a number of spastic adolescents and adults previously unknown, and it is felt that some cases were missed.

About 50 per cent of the total cases are in hospitals as mentally defective persons and therefore receiving constant care. The remainder will need some sort of periodic supervision.

Smoking and Lung Cancer.—Following the Statement made in the House of Commons on 27th June by the Minister of Health, arrangements were made to distribute the Minister's message as widely as possible. In the case of the general public, notices supplied by the Central Council for Health Education were placed in public libraries, public conveniences and in Corporation-owned transport vehicles. They were also advertised in the local Press.

A more personal message was distributed to school children, being in typewritten form on public health department headed notepaper and signed by the Medical Officer of Health. With the co-operation of the Director of Education, a copy was handed to every pupil about to leave Secondary, Grammar and All-age schools under the Authority.

The subject is now dealt with as a routine item in the Department's health propaganda programmes.

PHYSICALLY HANDICAPPED PERSONS

Reference was made in the report for 1956 to the register of handicapped persons (other than the blind and partially sighted) being compiled by the Welfare Authority. While it must take some time to arrive at an accurate statement of the position in the City, it can be said that in less than twelve months after the announcements that such a register was to be made, 723 applications had been received from physically handicapped persons in need of assistance of one kind or another (apart, of course, from financial aid) and of that number 441 had been registered. The registered cases were classified as follows :—

Amputations	18
Arthritis and Rheumatism (including Rheumatoid Arthritis) ..	38
Congenital Malformation and Deformities including Spastics ..	27
Diseases of the Digestive and Genito/Urinary Systems, of Heart and Circulatory System, and of the Skin	121

Injuries of Head, Face, Neck, Thorax, Abdomen, Pelvis and Trunk Injuries or Diseases of Upper and Lower Limbs and of the Spine	69
Organic Nervous Diseases. Epilepsy, Disseminated Sclerosis, Poliomyelitis, Sciatica, Hemiplegia, etc.	80
Neurosis, Psychoses and other nervous and Mental Disorders not included in the above	42
Tuberculosis, Respiratory	22
Tuberculosis, Non-Respiratory	3
Diseases or Injuries not Specified in previous groups, such as Asthma, Diabetes, Malaria, Osteomyelitis	14
Deceased or moved away from City area	7
Total	441

DOMESTIC HELP SERVICE

Details of the service provided during the year are as follows :—

Number of Home Helps employed at the end of the year :—

Whole-time	22
Part-time	112
	134

Cases in which help was provided :

Maternity	130
Tuberculosis	43
Chronic Sick	102
Aged and Infirm	508
Mental	2
Blind	35
Acute Sick	35
Miscellaneous	134
	989

Charges—cases in which :

Whole fee charged	19
Part fee charged	968
Service provided free	2

MENTAL HEALTH SERVICES

During the year, the Local Health Authority sought approval to erect two new wings at their Occupation and Training Centres, and permission from the Welsh Board of Health to borrow the necessary moneys is awaited.

Mental Illness

Table I gives details of the cases dealt with by the duly authorised officers, and it will be observed that 701 cases were dealt with in 1957, showing an overall increase of 78 over the 623 cases dealt with in 1956.

Of those admitted to hospital, only 2 were certified for admission as against 25 in 1956 and 429 were voluntary patients, an increase of 56 over the 373 in 1956.

Table II summarises the cases dealt with from 1949 to 1957, and it will be observed that the numbers have increased from 446 to 701. The two officers concerned are to be commended on the fact that they have coped with this steadily increasing demand on their services without the necessity of appointing additional staff.

The need for beds for geriatrics continues to be a major problem and it is a most unsatisfactory state of affairs that medical practitioners and relatives are forced into referring cases to the duly authorised officers because of this shortage. There has also been no easement in the serious shortage of beds for senile dementia cases and there is a long waiting list of such cases for beds.

Mental Defectiveness

The latest trend in research into the causes of mental deficiency is in metabolic errors, i.e., the inability of the body to deal with certain substances. It has been established that the presence of phenylpyruvate acid in the urine is an indication that there is lack of an enzyme, possibly a digestive ferment, and this acid can be detected by a simple urine test.

The condition, described as phenylketonuria is extremely rare, and approximately only one per cent of known cases of mental deficiency is attributed to it. From the information so far available it would appear that any brain damage takes place in the first three years of life, beyond which there is little likelihood of further damage, and that those children who are treated before pathological signs develop have greater chances of developing normally.

Early detection is therefore most important and, as the acid can be detected after the third week of life, the urine test should be carried out as soon as possible afterwards. With this in view, a routine urine testing service has been established so that all babies born in Cardiff may be tested. It is hoped that this will be one stage further towards eliminating certain types of mental deficiency.

Research amongst selected groups of mental defectives in Cardiff was carried out during the year by Dr. Nancy K. Gibbs, Senior Medical Officer, and one case with this metabolic disorder was diagnosed. Unfortunately he was over the age when the greatest benefit could be derived but he was referred for treatment. He has now been discharged on a modified diet and his urine is normal. Several other cases showed a suspicion of the error and their cases have been referred to the research specialists in London for their observations.

The close liaison between the health visitors and the mental health workers in providing a complete community care service continues with excellent results, and has many advantages over the visiting being carried out by mental health workers only. One of the advantages is that supervision is continuous from birth, through school life and on to adult life, and because of this, family and environmental history is more complete and the relatives and patients accept the supervision more readily than if there are changes at the various stages.

During the year, the local branch qf the National Association for Mentally Handicapped Children made generous gifts of equipment to the Occupation Centres.

This Association for the second year ran a short-stay home during August at the Preswylfa Occupation Centre and catered for 25 children. This was much appreciated by

parents who were given a much needed rest from the strain of looking after their handicapped children. The use of the Centre, including furniture, equipment, bedding, heating, lighting, etc., is provided free of cost by the Local Health Authority, and the Association is responsible for catering and staffing.

The statistical tables, including those conforming to the requirements of the Ministry of Health, are submitted.

It will be observed that the number of registered cases has fallen, and whereas this is most welcome, too much empahsis must not be placed on this as the decrease was the result of a further review of cases which made it possible to remove from the register a large number of cases who had stabilised themselves in the community.

The shortage of beds in Mental Deficiency Hospitals is still an urgent and serious problem and despite the fact that the Welsh Regional Hospital Board has increased the number of beds in recent years, Cardiff has derived no benefit. In fact, Cardiff's position has worsened as will be observed on reference to the Tables. We had an urgent waiting list of 18 at the end of the year as compared with 11 at the end of 1955 and 9 at the end of 1956, and the number of cases in hospitals has decreased from 333 for 1955 to 311 at the end of 1957.

TABLE I Lunacy and Mental Treatment Acts. Work of the Duly Authorised Officers during 1957.

	Cardiff			Other Authorities			Total		
	M.	F.	Total	M.	F.	Total	M.	F.	Total
(1) Number of Cases dealt with during 1956									
The Cases were dealt with as follows :—									
(i) Admitted to Mental Hospitals :									
(*a*) Whitchurch Hospital—									
Certified	—	—	—	—	—	—	—	—	—
Voluntary	155	186	341	6	9	15	161	195	356
Temporary	9	6	15	1	—	1	10	6	16
Neurosis Unit	8	—	8	—	—	—	8	—	8
Absconded Cases returned	12	10	22	—	—	—	12	10	22
(*b*) Ely Hospital—									
Certified	—	1	1	—	—	—	—	1	1
Voluntary ..	23	47	70	2	—	2	25	47	72
(*c*) Other Hospitals—									
Certified	—	—	—	—	1	1	—	1	1
Voluntary	—	—	—	—	—	—	—	—	—
Temporary	—	—	—	—	—	—	—	—	—
Absconded Cases returned	—	—	—	1	1	2	1	1	2
(ii) Transferred to St. David's (Sick Wards)	54	53	107	6	2	8	60	55	115
(iii) Admitted direct to St. David's Hospital (Sick Wards) ..	6	9	15	—	—	—	6	9	15
(iv) Discharged home or to Welfare Authorities	40	34	74	2	1	3	42	35	77
(v) Placed in care of Police, Military Authorities, etc. ..	4	—	4	1	—	1	5	—	5
(vi) Died before certification ..	1	—	1	—	—	—	1	—	1
(vii) Other discharges	—	1	1	—	—	—	—	1	1
(viii) Transferred to Sick Wards, other Hospitals	—	1	1	—	—	—	—	1	1
(ix) Cases still under observation	3	3	6	1	—	1	4	3	7
Total ..	315	351	666	20	15	35	335	366	701
(2) Number of Cases seen by Psychiatrist in St. David's Hospital Sick Wards during 1956 :									
No action taken	47	43	90	—	—	—	47	43	90

TABLE II Summary of the Work of the Duly Authorised Officers 1949–1957.

	1949	1950	1951	1952	1953	1954	1955	1956	1957
Admitted to Mental Hospitals ..	298	305	267	291	347	348	364	419	455
Returned to Mental Hospitals ..	2	4	—	—	12	14	12	13	24
Transferred to Sick Wards ..	91	106	121	98	102	111	99	93	116
Admitted direct to Sick Wards ..	11	11	8	7	4	13	15	10	15
Discharged home or to Welfare Authorities	40	63	77	101	72	101	98	81	77
Placed in care of Police, Military Authorities, etc.	3	4	—	—	11	4	5	4	5
Died in Observation Wards ..	1	—	—	2	1	—	—	—	1
Other Discharges	—	1	2	—	2	—	2	1	1
Cases still under Observation ..	—	1	3	1	10	7	4	2	7
Total ..	446	495	478	500	561	598	599	623	701
Seen by Psychiatrist in Sick Wards– No action taken	N. R.	271	275	232	180	139	66	58	90

TABLE III Mental Deficiency Acts. Particulars of Cases reported during 1957.

	Under 16 yrs.			Over 16 yrs.			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Particulars of Cases Reported during 1957 :—									
(*a*) Cases ascertained to be defectives "subject to be dealt with." Action taken on reports by :—									
(i) Local Education Authorities on children									
(1) While at school or liable to attend school	10	5	15	—	—	—	10	5	15
(2) On leaving Special Schools ..	2	4	6	—	—	—	2	4	6
(3) On leaving Ordinary Schools ..	—	—	—	—	—	—	—	—	—
(ii) Police or by Courts	1	—	1	—	—	—	1	—	1
(iii) Other Sources	—	—	—	—	4	4	—	4	4
Total of 1 (*a*) ..	13	9	22	—	4	4	13	13	26
(*b*) Cases reported who were found to be defectives but were not regarded as "subject to be dealt with" on any ground	2	1	3	6	12	18	8	13	21
(*c*) Cases reported who were not regarded as defectives and are thus excluded from (*a*) or (*b*)	9	2	11	2	—	2	11	2	13
(*d*) Cases reported in which action was incomplete at 31st December, 1957, and are thus excluded from (*a*) or (*b*)	6	1	7	—	—	—	6	1	7
Total of 1(*a*)–(*d*) inc. ..	30	13	43	8	16	24	38	29	67
2. Disposal of Cases Reported during 1957 :—									
(*a*) Of the cases ascertained to be defective "subject to be dealt with," number :—									
(i) Placed under Statutory Supervision ..	12	8	20	—	2	2	12	10	22
(ii) Placed under Guardianship ..	—	—	—	—	—	—	—	—	—
(iii) Taken to "places of safety" ..	—	—	—	—	—	—	—	—	—
(iv) Admitted to Institutions	—	1	1	—	1	1	—	2	2
(v) Action not yet taken	6	1	7	—	—	—	6	1	7
(vi) Left Cardiff or Deceased	1	—	1	—	1	1	1	1	2
(*b*) Of the cases not ascertained to be defectives "subject to be dealt with," number :—									
(i) Placed under voluntary supervision ..	1	1	2	6	10	16	7	11	18
(ii) Action unnecessary	9	2	11	2	—	2	11	2	13
(iii) Left Cardiff or Deceased	1	—	1	—	2	2	1	2	3
Total of Item 2 ..	30	13	43	8	16	24	38	29	67

TABLE IV

Number of Mental Defectives for whom care was arranged by the Local Health Authority under Circular 5/52 during 1957, and admitted to :—

	Under 16 yrs.			Over 16 yrs.			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
(*a*) National Health Service Hospitals	3	1	4	—	2	2	3	3	6
(*b*) Elsewhere*	—	—	—	—	—	—	—	—	—
TOTAL ..	3	1	4	—	2	2	3	3	6

* The Cardiff Branch of the National Society for Mentally Handicapped Children provided care for 25 patients at the Preswylfa Occupation Centre in Cardiff during August, 1957.

TABLE V.

Number of Mental Defectives who were in Institutions, under Community Care (including Voluntary Supervision) or in " Places of Safety " on 1st January, 1957, who ceased to be under any of these forms of care during 1957.

	Under 16 years			Over 16 years			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
(*a*) Ceased to be under Care :—									
(i) Transferred to Local Education Authority :									
(*a*) On reaching School Age	5	2	7	—	—	—	5	2	7
(*b*) Under Education (Miscellaneous Provisions), Act	1	—	1	—	—	—	1	—	1
(ii) No longer in need of									
(*a*) Statutory Supervision	—	—	—	9	10	19	9	10	19
(*b*) Voluntary Supervision	—	—	—	3	5	8	3	5	8
(iii) Admitted to Mental Hospital									
(*a*) From Statutory Supervision	—	—	—	1	—	1	1	—	1
(*b*) From Voluntary Supervision	—	—	—	—	2	2	—	2	2
(*c*) From Hospitals ..	—	—	—	—	—	—	—	—	—
(*b*) Died, Removed from Area, or Lost Sight of :—									
(i) Died under Statutory Supervision	—	—	—	1	—	1	1	—	1
(ii) Died under Voluntary vision	1	1	2	—	3	3	1	4	5
(iii) Died in " Places of Safety "	—	—	—	1	—	1	1	—	1
(iv) Died whilst subject to Order	2	1	3	2	5	7	4	6	10
(v) Left Cardiff :									
(*a*) Statutory Supervision	—	—	—	—	2	2	—	2	2
(*b*) Voluntary Supervision	3	—	3	2	8	10	5	8	13
(vi) Lost Sight of									
(*a*) Statutory Supervision	—	—	—	1	—	1	1	—	1
(*b*) Voluntary Supervision	—	—	—	—	—	—	—	—	—
	12	4	16	20	35	55	32	39	71

TABLE VI

Disposal of Cases not included in Tables III (2) and V.

	Under 16 years			Over 16 years			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
Admitted to Hospitals	1	1	2	2	1	3	3	2	5
Placed under Guardianship	—	—	—	1	—	1	1	—	1
Admitted to Places of Safety	1	—	1	3	3	6	4	3	7
Granted Licence	1	1	2	4	6	10	5	7	12
Licence revoked	—	—	—	1	4	5	1	4	5
Transferred from one Hospital to another	—	—	—	1	3	4	1	3	4
Transferred from Licence to Guardianship	—	—	—	1	—	1	1	—	1
Transferred from " Places of Safety " to Hospital	1	1	2	—	1	1	1	2	3
Discharged from " Places of Safety "	—	—	—	1	1	2	1	1	2
Discharged from Mental Hospitals	—	—	—	1	1	2	1	1	2
Discharged from Order :									
Licence	—	—	—	3	2	5	3	2	5
Hospital	—	—	—	1	2	3	1	2	3
Guardianship	—	—	—	1	1	2	1	1	2
Died in Mental Hospitals	—	—	—	—	1	1	—	1	1
Provided with Temporary Accommodation	3	1	4	—	2	2	3	3	6
Placed under Statutory Supervision	4	11	15	1	1	2	5	12	17
Placed under Voluntary Supervision	—	—	—	6	6	12	6	6	12
	11	15	26	27	35	62	38	50	88

TABLE VII

Mental Deficiency Acts. Statistical Return.

Total cases on registers at 31st December, 1957—

	Under 16 yrs.			Over 16 yrs.			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
(*a*) Cases " Subject to be dealt with " :—									
(i) Under Statutory Supervision	56	59	115	203	207	410	259	266	525
(ii) Under Guardianship	—	—	—	2	4	6	2	4	6
(iii) In " Places of Safety "	—	—	—	1	1	2	1	1	2
(iv) In Certified Institutions	25	12	37	139	111	250	164	123	287
(v) In State Institutions	—	—	—	7	3	10	7	3	10
(vi) On Licence from Institutions	2	1	3	6	5	11	8	6	14
(vii) Absconded from Institutions	—	—	—	—	—	—	—	—	—
(viii) Action not yet taken	6	1	7	—	—	—	6	1	7
(*b*) Cases not at present " Subject to be dealt with " :—									
(i) Under Voluntary Supervision	6	4	10	78	87	165	84	91	175
(ii) Action not yet taken	—	—	—	—	—	—	—	—	—
TOTAL	95	77	172	436	418	854	531	495	1026

TABLE VIII

Mental Deficiency Acts. Number of Cases receiving training at the Nursery, Occupation and Training Centres, on 31st December, 1957.

		Under 16 yrs.			Over 16 yrs.			Total		
		M.	F.	T.	M.	F.	T.	M.	F.	T.
(A) Pengam Road Centre										
(*a*) Nursery (Class A)	Under Supervision ..	10	6	16	—	—	—	10	6	16
	From Other Authorities	—	—	—	—	—	—	—	—	—
(*b*) Nursery (Class B)	Under Supervision ..	5	6	11	—	—	—	5	6	11
	From Other Authorities	1	—	1	—	—	—	1	—	1
(*c*) Occupation Centre	Under Supervision ..	2	1	3	6	7	13	8	8	16
	From Other Authorities	1	—	1	1	2	3	2	2	4
(*d*) Training Centre	Under Supervision ..	—	1	1	26	14	40	26	15	41
	From Other Authorities	—	—	—	9	10	19	9	10	19
	Total ..	19	14	33	42	33	75	61	47	108
(B) "Preswylfa," Clive Road Centre										
(*a*) Nursery (Class A)	Under Supervision ..	7	10	17	—	—	—	7	10	17
	From Other Authorities	2	1	3	—	—	—	2	1	3
(*b*) Nursery (Class B)	Under Supervision ..	10	8	18	—	—	—	10	8	18
	From Other Authorities	2	2	4	—	—	—	2	2	4
(*c*) Occupation Centre	Under Supervision ..	14	8	22	—	—	—	14	8	22
	From Other Authorities	3	6	9	—	—	—	3	6	9
	Total ..	38	35	73	—	—	—	38	35	73
	Total (A) & (B)	57	49	106	42	33	75	99	82	181

TABLE IX

Classification of Mental Defectives in the Community on 31st December, 1956 (according to need on that date).

	Under 16 yrs.			Over 16 yrs.			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
(*a*) Cases included in Table IV (i)–(iii) in need of Hospital care and reported accordingly to the Hospital Authority :—									
(1) In urgent need of Hospital care :—									
(i) " Cot and Chair " cases	3	3	6	—	—	—	3	3	6
(ii) Ambulant low grade cases	4	2	6	1	1	2	5	3	8
(iii) Medium grade cases	—	—	—	1	—	1	1	—	1
(iv) High grade cases	—	—	—	3	—	3	3	—	3
TOTAL Urgent Cases	7	5	12	5	1	6	12	6	18
(2) Not in urgent need of Hospital care :—									
(i) " Cot and Chair " cases	—	—	—	—	—	—	—	—	—
(ii) Ambulant low grade cases	3	1	4	2	3	5	5	4	9
(iii) Medium grade cases	—	—	—	—	—	—	—	—	—
(iv) High grade cases	—	—	—	4	3	7	4	3	7
TOTAL Non-urgent cases	3	1	4	6	6	12	9	7	16
TOTAL ..	10	6	16	11	7	18	21	13	34
(*b*) Of the cases included in Table IV (*a*), (i), (ii) (vi) and (*b*) (i) number considered suitable for :—									
(i) Nursery and Occupation Centre ..	57	59	116	15	22	37	72	81	153
(ii) Training Centre	—	1	1	43	35	78	43	36	79
(iii) Home Training	—	2	2	—	3	3	—	5	5
TOTAL ..	57	62	119	58	60	118	115	122	237
(*c*) Of the cases included in (*b*), number receiving training :—									
(i) In Nursery and Occupation Centre ..	*43	39	82	6	7	13	49	46	95
(ii) In Training Centre	—	1	1	26	14	40	26	15	41
(iii) At Home	—	—	—	—	—	—	—	—	—
TOTAL ..	43	40	83	32	21	53	75	61	136

* In addition 2 cases on Licence and 3 cases in which action was incomplete at end of year were attending Centres.

TABLE X

Age and classification of Cases reported during 1957

Age	Idiots		Imbeciles		Feeble-minded		Moral Defectives		Classification Deferred		Not Mentally Defective		Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Under 1									2				2
2			1								1		2
3	1	1	2	3								1	8
4			2								1		3
5			3						1		1		5
6				1	1								2
7					1								1
8				1									1
9											1		1
10					1								1
12												1	1
15					6	5					5		16
Over 21			1	1	5	15					2		24
TOTAL ..	1	1	9	6	14	20	—	—	3	—	11	2	67

TABLE XI

Classification of Cases reported during 1948–1957

Classification	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	TOTAL
Idiots ..	15	1	3	2	7	3	1	3	6	2	43
Imbeciles ..	12	8	5	11	8	11	13	8	12	15	103
Feebleminded ..	32	41	34	31	34	35	53	42	43	34	379
Moral Defectives ..	—	—	—	—	—	—	—	—	—	—	—
Classification Deferred ..	—	7	17	3	3	3	3	2	13	3	54
	59	57	59	47	52	52	70	55	74	54	579
Not Mentally Defective ..	6	7	8	13	8	17	5	10	22	13	109
TOTAL ..	65	64	67	60	60	69	75	65	96	67	688

TABLE XII Summary of ascertained Cases

	Position at 31st December 1956	Additions during 1957	Deletions during 1957	Position at 31st December 1957
Under Statutory Supervision ..	518	39	32	525
Under Guardianship	6	2	2	6
In Places of Safety	1	8	7	2
In Hospitals and on Licence ..	322	7	18	311
" Subject to be dealt with " Action not yet taken	16	7	16	7
Under Voluntary Supervision ..	180	31	36	175
TOTAL ..	1,043	94	111	1,026

TABLE XIV Summary of ascertained Cases, 1948–1957

	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957
1. Cases " Subject to be dealt with "										
Under Statutory Supervision	446	447	462	475	477	473	510	543	518	525
Under Guardianship ..	3	2	2	2	2	3	5	5	6	6
In Places of Safety ..	1	2	2	2	—	2	2	2	1	2
In Hospitals	259	265	262	270	278	293	301	311	298	287
In State Hospitals ..	13	14	13	12	11	7	9	10	10	10
On Licence from Hospitals	38	38	34	31	25	19	17	12	13	14
Absconded from Hospitals ..	—	—	1	—	—	—	—	—	1	—
Action not yet taken	14	8	8	2	4	5	11	—	16	7
2. Cases not at present " Subject to be dealt with "										
Under Voluntary Supervision	122	119	139	136	140	154	151	167	180	175
Action not yet taken ..	—	—	—	—	—	—	—	—	—	—
Total ..	896	895	923	930	937	956	1,006	1,050	1,043	1,026
3. Attending Occupation & Training Centres ..	78	86	84	87	76	95	122	129	137	141

TABLE XIII Classification and Summary of Cases under Order 1948–1957

	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957
Idiots	27	26	25	26	28	27	26	25	27	24
Imbeciles ..	95	98	95	95	93	90	91	98	98	98
Feebleminded ..	188	192	189	191	192	202	212	214	202	194
Moral Defectives ..	2	2	2	2	2	2	2	1	1	1
Not Classified ..	1	1	1	1	1	1	1	—	—	—
TOTAL ..	313	319	312	315	316	322	332	338	328	317
In Hospitals	272	279	276	282	289	300	310	321	309	297
On Licence	38	38	34	31	25	19	17	12	13	14
Under Guardianship ..	3	2	2	2	2	3	5	5	6	6
TOTAL ..	313	319	312	315	316	322	332	338	328	317
New Cases	23	18	7	18	16	26	24	22	12	9
Discharges and Deaths ..	8	12	14	15	15	20	14	16	22	20
Increase on Previous Year	15	6	—	3	1	6	10	6	—	—
Decrease on Previous Year	—	—	7	—	—	—	—	—	10	11
Urgent Waiting List ..	—	6	11	11	14	10	11	11	9	18

TABLE XV — Cases under Order at 31st December, 1957

	UNDER 16								OVER 16								TOTAL		
	Idiots		Imbeciles		Feeble-minded		Moral Defectives		Idiots		Imbeciles		Feeble-minded		Moral Defectives		Under 16	Over 16	Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
In Welsh Institutions																			
Ely Lodge Hospital ..	8	5	11	3	2	1	—	—	10	—	39	22	52	45	—	—	30	168	198
Brynhyfred	—	—	—	—	—	—	—	—	—	—	1	1	2	—	—	—	—	4	4
Hensol Castle	—	1	1	2	1	—	—	—	—	—	4	3	19	15	—	—	5	41	46
Llanfrechfa Grange ..	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	2	2
Llys Maldwyn	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	2
Total ..	8	6	14	5	3	1	—	—	10	—	45	26	74	60	—	—	37	215	252
In English Institutions																			
Eltoe House	—	—	—	—	—	—	—	—	—	—	—	—	—	8	—	—	—	8	8
Hortham	—	—	—	—	—	—	—	—	—	—	—	—	2	3	—	—	—	5	5
House of Help	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
Leavesden	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
Royal Hostel, Elsted ..	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	1
Royal Western Counties ..	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	3	3
St. Elizabeth's	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
St. Francis' School ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
St. Joseph's	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	2	2
St. Mary's, Roehampton ..	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
St. Mary's, Weston ..	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
St. Teresa's	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
Stoke Park	—	—	—	—	—	—	—	—	—	—	4	1	3	2	—	—	—	10	10
Total ..	—	—	—	—	—	—	—	—	—	—	4	1	6	24	—	—	—	35	35
On Licence																			
Ely Lodge	—	—	1	1	—	—	—	—	—	—	—	—	5	2	—	—	2	7	9
Hensol	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	2	2
Royal Western Counties ..	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
St. Francis, Buntingford ..	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Stoke Park	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
Total ..	—	—	1	1	1	—	—	—	—	—	—	—	6	5	—	—	3	11	14
State Institutions																			
Moss Side	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	3	3
Rampton	—	—	—	—	—	—	—	—	—	—	—	—	4	2	—	1	—	7	7
Total ..	—	—	—	—	—	—	—	—	—	—	—	—	7	2	—	1	—	10	10
Guardianship																			
Nazareth House, Cardiff ..	—	—	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	4	4
St. Joseph's, Chiswick ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Relatives	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	1
Employers	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	1
Total ..	—	—	—	—	—	—	—	—	—	—	1	—	1	4	—	—	—	6	6
Grand Total ..	8	6	15	6	4	1	—	—	10	—	50	27	94	95	—	1	40	277	317

TABLE XVI Cases under Order 1948–1957

	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957
1. Welsh Institutions										
Ely Lodge ..	211	216	212	218	219	214	221	223	217	207
Brynhyfred ..	—	1	2	2	2	3	3	4	4	4
Garth Angharad ..	—	—	—	—	1	—	—	—	—	—
Hensol Castle ..	35	32	27	27	25	33	37	43	47	48
Llanfrechfa Grange ..	—	—	—	—	—	2	2	2	2	2
Llys Maldwyn ..	—	—	—	—	2	3	3	3	2	2
Llwyn View ..	—	—	—	1	1	1	1	1	—	—
	246	249	241	248	250	256	267	276	272	263
2. English Institutions										
Eltoe House, Leyton	10	10	10	10	10	11	11	11	9	8
Hortham Colony, Bristol	7	7	7	6	5	6	3	3	5	5
House of Help, Bath ..	3	3	3	3	3	3	3	3	1	1
Leybourne Grange ..	—	1	1	1	1	1	1	—	—	—
Royal Hostel, Elsted	1	1	1	1	1	1	1	1	1	1
Royal Western Counties, Starcross ..	—	1	1	1	3	6	5	5	5	4
Sandhill Park ..	—	—	—	—	—	—	1	—	—	—
St. Elizabeth's ..	1	1	1	1	1	1	1	1	1	1
St. Francis', Buntingford	1	1	1	1	—	—	—	1	1	1
St. Joseph's, Sudbury	2	2	2	2	2	2	2	2	2	2
St. Margaret's, Birmingham ..	—	—	—	—	1	1	1	—	—	—
St. Mary's, Alton ..	1	1	1	1	1	1	1	—	—	—
St. Mary's, Painswick	2	2	2	2	2	2	2	2	—	—
St. Mary's, Roehampton	—	1	1	1	1	1	1	1	1	1
St. Mary's, Weston ..	—	1	1	1	1	1	1	1	1	1
St. Raphaels, Potters Bar	1	1	1	1	1	1	1	1	—	—
St. Teresa's ..	3	3	3	3	3	2	2	2	1	1
Stoke Park Colony ..	19	18	20	18	17	16	15	14	12	11
Leavesden ..	—	—	—	—	—	—	—	—	—	1
State Institutions ..	13	14	13	12	11	7	8	9	10	10
	64	68	69	65	64	63	60	57	50	48
3. Guardianship Cases										
In Wales	2	1	1	1	1	2	4	4	5	6
In England ..	1	1	1	1	1	1	1	1	1	—
	3	2	2	2	2	3	5	5	6	6

VIII.—REPORT OF CHIEF PUBLIC HEALTH INSPECTOR

Introductory

In the report for 1956, Mr. Pyatt referred to it as being his "thirtieth and last report" to the Council. As events turned out he completed another full year of office, retiring on the 31st of December, 1957. Though this report of the activities of the Public Health Inspectors' Section has been compiled since Mr. Pyatt's retirement, all the work which it summarises was exccuted under his direction.

As will be seen from the succeeding pages, the solid routine operations covering such matters as the abatement of nuisances and enforcements of house repairs, the supervision of food premises, factories and shops, the control of dairies, ice cream premises, offensive trades and lodging houses have continued to occupy the greater part of the time of the inspectorial staff. They are operations which are undertaken quietly and behind the scenes ; but they are the only firm basis for the maintenance of a healthy environment. However, certain special events were superimposed upon the day-to-day routine and were handled without any increase in staff. The first was the beginning of a slum clearance programme which is likely to be a feature of the local government scene for some years to come. In July the Council defined a part of the docks area to be a Clearance Area and to seek powers to clear the area by compulsory acquisition.

The functions of the public health inspectors were also extended by two pieces of general legislation. The Rent Act of 1957 came into force ; public health inspectors undertake the work associated with the issue and revocation of certificates of disrepair. The first part of the Clean Air Act of 1956 also became operative during 1957. The Act, which introduces new forms of control of atmospheric pollution, is a challenge for the future ; its enforcement should gradually expand until it forms a substantial part of the work of the public health inspectors.

Details of the work carried out in the various sections comprising environmental Sanitation are given in the respective sections of the report. Much of the information is statistical and takes the form prescribed by various government departments.

W. BATE, M.A.

HOUSING

Demolition and Repair

Action was taken to secure the demolition or closure of 61 individual houses or parts of houses, during the year. Twenty houses were actually demolished.

In addition to these, 239 houses in Loudoun Square, Frances Street, Sophia Street, Nelson Street, Canal Parade, Maria Street and Angelina Street were inspected with a view to demolition. They comprise the Bute Street (No. 1) Clearance Area and application was made for the confirmation of a compulsory purchase order to effect clearance of the area. This will involve the rehousing of nearly 400 families made up of over a thousand individuals. The final administrative decision affecting the future of the area is likely to be made during 1958.

Details of this work and the enforcement of house repairs is analysed in the following table.

(1) (*a*)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	4,259
(*b*)	Number of inspections made for the purpose	9,673

(2) (*a*) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 —

(*b*) Number of inspections made for the purpose —

(3) Number of dwellings found to be in a state so dangerous or injurious to health as to be unfit for human habitation 325

(4) Number of dwellings (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation 722

2. *Remedy of Defects during the year without Service of Formal Notices :—*
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers 518

3. *Action under Statutory Powers during the Year :—*

(*a*) Proceedings under Sections 9 and 10 of the Housing Act, 1936 :—

(i) Number of dwelling-houses in respect of which notices were served requiring repairs 21

(ii) Number of dwelling-houses which were rendered fit after service of formal notices :—

(*a*) By owners 19

(*b*) By Local Authority in default of owners .. 1

(*b*) Proceedings under Public Health Acts :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 297

(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—

(*a*) By owners 298

(*b*) By Local Authority in default of owners 6

(*c*) Proceedings under Sections 11 and 13, of the Housing Act, 1936, and Section 17 of the Housing Act, 1956 :—

(i) Number of dwelling-houses in respect of which Demolition Orders were made 9

(ii) Number of dwelling-houses demolished in pursuance of Demolition Orders 20

(iii) Undertakings accepted —

(*d*) Proceedings under Section 12 of the Housing Act, 1936 and Section 17 of the Housing Act, 1956 :—

(i) Number of parts of buildings or underground rooms in respect of which Closing Orders were made 6

(ii) Number of separate basements or underground rooms in respect of which Closing Orders were determined ; the basement or room having been rendered fit —

(iii) Undertakings accepted —

(*e*) Proceedings under Section 10 of the Local Government (Miscellaneous Provisions) Act, 1953, and Section 17 of the Housing Act, 1956:—

(i) Number of dwelling-houses in respect of which Closing Orders were made in lieu of Demolition Orders 46

Housing Improvements

Property owners still continue to be reluctant to take advantage of the grant scheme whereby the Corporation contribute 50 per cent of the cost of modernising older properties up to a maximum grant of £400. It has now become established practice for almost all the applicants to be owner-occupiers or persons intending to purchase for their own occupation.

Only 51 applications for grants were received during the year; of these 45 were granted and six refused.

Rent Act : Certificates of Disrepair

Comments have been made in previous reports on the failure of the Housing Repairs and Rents Act of 1954 to secure a noticeable improvement in the standard of maintenance of older house properties. The Act was replaced in July by the Rent Act of 1957 which authorised greater rent increases and introduced new procedures associated with the issue of certificates of disrepair. One immediate effect of the new Act is noticeable by comparing the number of applications for certificates of disrepair under the two Acts. In the two-and-a-half years of the operation of the old Act, a total of 219 applications were received, of which 183 applications for certificates were granted; of these only 70 certificates have ever been revoked. In only six months of the operation of the 1957 Act these figures have nearly doubled :—

Rent Act, 1957

Applications for Certificates of Disrepair received ..	354
Applications for Certificates of Disrepair approved ..	317
Applications for Certificates of Disrepair refused	2
Applications for Certificates of Disrepair withdrawn ..	12
Application for revocation approved	11

This is a sign that property owners have exercised their right to increase rents on a much greater scale than they did under the old Act. This has meant a considerable strain on staff resources, not least on the clerical side because of the unwieldy administrative procedure which involves the serving of a number of intermediate notices prior to the issue of certificates. Whether the Act will lead to the effective repair of houses only the future can show. One important change which may have a bearing on this is that whereas under the old Act it was left to the local authority to set the standard of repair, under the Act of 1957, it is left to the tenant to say in the first instance, what repairs shall be carried out. The local authority, though obliged to exclude "unreasonable" repairs, are not empowered to add to a certificate any repairs which, in the opinion of its officers are necessary.

Council Housing Estates.—The following is a record of the work in connection with the sanitary condition of the Council housing estates :—

Vacant houses inspected	521
Visits regarding exchanges and transfers	208
Visits regarding vermin, cleansing, overcrowding, etc. ..	24
Visits regarding rats, poultry, trading, etc.	5
Visits to families prior to re-housing in Council houses ..	340
Other visits (Estate depots, etc.)	808
	1,906

The number of new houses (including shops, flats and bungalows) let during the year was 539 and considering the demands from tuberculosis and ordinary applicants and tenants of condemned houses, this number cannot be considered as very satisfactory in view of the large number of families still awaiting re-housing.

GENERAL SANITARY INSPECTION

The number of complaints of nuisances received and dealt with was 4,689 which shows an increase of 1,319 on the previous year.

The numbers of inspections and visits made by the public health inspectors and the numbers of notices served were as follows :—

	Inspections or Visits	Intimation Notices Served	Statutory Notices Served
Houses inspected	4,259	722	296
Houses re-inspected	5,414		
Dairies and Milkshops	716	13	—
Ice Cream premises and vehicles	675	3	—
Restaurants and food preparing places	2,925	48	—
Food shops, stores and markets	3,627	51	—
Food vehicles	102	8	—
Railway stations re Food	19	—	—
Slaughterhouses and knackers yards	448	1	—
Offensive trades and marine stores	24	3	—
Factories—Mechanical	771	2	—
Non-Mechanical	454	4	—
Others	29	—	—
Workplaces other than offices	135	1	—
Offices	17	—	—
Seamen's Lodging Houses :—			
Day	179	—	—
Night	20	—	—
Common lodging houses	12	—	—
Tents, vans, sheds	155	2	—
Amusement places and public houses	62	3	—
Swimming baths	123	—	—
Water supply and water courses	32	—	—
Tips	31	—	—
Accumulations	250	33	2
Sewers	182	7	—
Drains	3,518	95	24
Public Conveniences	35	—	—
Flooding	98	—	—
Back lanes	133	—	—
Swine and other animals	66	—	—
Smoke and grit observations	291	—	—
Rodent Control	1,195	—	—
Vermin	23	—	—
Shops Act	1,206	—	—
Other premises, etc.	4,617	23	—
	31,843	1,117	322

The number of drains tested was 287 (221 with smoke and 66 with chemicals).

The following is a summary of nuisances abated, repairs executed, etc., under the supervision of the public health inspectors.

Vermin (Private Houses)

Number of houses found verminous	23
Number of houses where vermin was abated	23

Nuisances Abated, etc.

Houses

Number extensively repaired	136
Number where minor repairs completed	581
Dirty conditions remedied	6

Drainage

Drains tested—smoke	221
Drains tested—chemicals	66
New drains constructed	20
Drains re-laid or repaired	228
Drains cleansed	722
Sinks provided	6
Sinks repaired	—

W.C.s

Additional W.C.s provided	8
W.C.s reconstructed or repaired	29
Flushing apparatus provided	3

Water Supply

Samples of Water taken for analysis	7

Swimming Baths

Samples of water taken	394

Seamen's Lodging Houses

Repairs or improvements effected	1

Food Vehicles and Personnel

Warnings regarding general cleanliness	4

Ice Cream Premises

Number of premises where sanitary improvements have been effected	1
Washing facilities provided or improved (geysers)	10
Samples obtained	15

Food Shops, Kitchens, Fried Fish Shops, etc.	
Improved or repaired	18
Cleanliness improved	16
Washing facilities provided or improved (geysers) ..	13
Offensive Trades and Knackers yards	
Cleanliness Improved	1
Back Lanes	
Accumulations removed	3
Surfaces repaired	2
Pharmacy and Poisons Act	
Visits	3
Stables, Piggeries, etc.	
Sanitary Conditions Improved	2
Accumulations removed	2
Shops Act Inspections	
Visits to Shops	1,206
Visits to Shops (Sundays)	48
Observations :—	
Closing Orders (Sundays)	62
Closing Orders	41
Half Holiday Orders	393
Warnings :—	
Weekly half-holiday	18
Closing Orders	3
Assistants half-holiday	1
Young Persons (Employment Act)	—
Sunday Closing	8
Notices Served—Intimation	2
Statutory	—
Notices Complied—Intimation	1
Statutory	—

Common Lodging Houses.—There are two registered common lodging houses.

Seamen's Lodging Houses.—There are 35 licensed seamen's lodging houses.

Legal Proceedings.—The following is a summary of legal proceedings taken during the year in connection with general sanitary inspection :—

Acts, etc., under which proceedings were taken	Number	Fined	Adj. sine die	To pay costs only	Dismissed	Withdrawn	Nuisance Order obtained	Amount of Fines and Costs
								£ s. d.
Public Health Act, 1936 ..	9	1	1	2	—	5	2	3 7 0

RODENT CONTROL

The staff employed on this work are organised into two sections. A Rodent Officer and six operators are employed on sewer maintenance treatments, local authority premises and business premises. Two additional operators deal mainly with private dwellings, and occasionally with complaints from business premises.

Sewer Maintenance Treatments

Within the City there are about 350 miles of public sewers with 4,937 manholes. For treatment purposes, these are separated into 70 districts. Test-baiting undertaken within the previous calendar year had established that 28 districts were free from rat infestation.

The first treatment involved the baiting of 2,847 manholes in the remaining 42 districts with sausage rusk and zinc phosphide. A supplementary test-bait of five districts confirmed freedom from infestation.

The second treatment during the latter half of the year entailed complete treatment of 42 districts comprising 2,437 manholes. In 25 other districts (1,967 manholes), test-baiting indicated only slight infestation and it was necessary to treat only the infested and immediately adjoining manholes as recommended by the Ministry of Agriculture, Fisheries and Food. The second treatment was carried out using arsenic and bread mash.

A calculation of the estimated kill resulting from the sewer treatments suggests that of the order of 14,240 rats were eliminated. Takes of bait which were recorded during these treatments are as under :—

	Prebait Takes	
	Complete	Partial
First Treatment	397	424
Second Treatment	715	262

Local Authority Premises

Periodical treatments are carried out at the premises of the Transport Department, City Engineer's Yards, stores and depots, the Central Market, Roath Market Abattoir, premises of the Parks Department and refuse tips. As a result of these operations, 29 bodies were recovered and an estimated total kill of 364 rats was achieved by using arsenic and zinc phosphide. In addition, the use of 18 lbs. of Warfarin was responsible for exterminating an unknown number of rats.

Maintenance Treatments of Business Premises

During the year, contracts were entered into for routine rodent control of 240 business premises within the City. The total income from this source amounted to £2,023, which is £73 more than in 1956.

It is estimated that at least 1,670 rats were killed, excluding an unknown number where 299 lbs. of Warfarin bait was employed.

Bodies of 131 rats and 52 mice were recovered.

In addition to work under contracts, 67 special treatments were undertaken at the request of occupiers of business premises. Income from this source amounted to £116.

Treatment in Private Dwellings

This work is undertaken free of charge and is undertaken by two operators, using Warfarin. 363 premises were treated for rats and 73 premises for mice. In addition, 15 treatments for rats and 17 for mice, were carried out at local authority premises.

An analysis of all the surface treatments for the year ending 31st March, 1958, as required by the Ministry of Agriculture, Fisheries and Food is reproduced hereunder :—

	Type of Property				
	Non-Agricultural				
	(1) Local Authority	(2) Dwelling Houses (inc. Council Houses)	(3) All Other (including Business Premises)	(4) Total of Cols. (1), (2) & (3)	(5) Agricultural
I. Number of properties in Local Authority's District (Notes 1 and 2)	134	64,763	9,128	74,025	183
II. Number of *properties inspected* as a result of :					
(*a*) Notification	77	836	221	1,078	Nil
(*b*) Survey under the Act	18	214	33	265	24
(*c*) Otherwise (e.g., when visited primarily for some other purpose) ..	5	4,259	8,826	13,090	Nil
III. Total Inspections carried out– including re-inspections .. (To be completed only if figures are readily available)	87	5,906	9,678	15,671	61
IV. Number of *properties* inspected (in Sect. II) which were found to be *infested* by :					
(*a*) Rats { Major	Nil	Nil	Nil	Nil	Nil
{ Minor	35	340	179	554	Nil
(*b*) Mice { Major	Nil	Nil	Nil	Nil	Nil
{ Minor ..	15	53	59	127	Nil
V. Number of *infested properties* (in Sect. IV) treated by the L.A. (Figures should NOT exceed those given at Sect. IV)	50	393	238	681	Nil
VI. Total treatments carried out— including re-treatments .. (To be completed only if figures are readily available)	88	393	505	986	Nil
VII. Number of notices served under Section 4 of the Act :					
(*a*) Treatment	Nil	Nil	Nil	Nil	Nil
(*b*) Structural Work .. (i.e., Proofing)	Nil	Nil	Nil	Nil	Nil
VIII. Number of cases in which default action was taken following the issue of a notice under Sect. 4 of the Act ..	Nil	Nil	Nil	Nil	Nil
IX. Legal Proceedings	Nil	Nil	Nil	Nil	Nil
X. Number of " Block " control schemes carried out ..	One				

FACTORIES

The numbers and type of factories on the register are as follows :—

Bakehouses	68
Laundries	23
Tailors	40
Dressmakers and Milliners ..	38
Boot Repairers	98
Miscellaneous	770

Details of the sanitary inspection of factories under the Factories Act, 1937, in the form required by the Minister of Labour and National Service are as follows :—

Part I of the Act

1.—Inspections for Purposes of Provisions as to Health

Premises (1)	Number on Register (3)	Number of Inspections (4)	Number of Written Notices (5)	Number of Occupiers Prosecuted (6)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	348	454	2	—
(ii) Factories not included in (1) in which Section 7 is enforced by the Local Authority	678	771	4	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ..	11	29	—	—
Total ..	1,037	1,254	6	—

2.—Cases in which Defects were Found

Particulars (1)	Number of cases in which defects were found: Found (3)	Remedied (4)	Referred to H.M. Inspector (5)	Referred by H.M. Inspector (6)	Number of cases in which prosecutions were instituted (7)
Want of cleanliness (S.1) ..	49	47	—	3	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3) ..	—	—	—	—	—
Inadequate ventilation (S.4) ..	2	1	—	—	—
Ineffective drainage of floors (S.6) ..	4	4	—	—	—
Sanitary Conveniences (S.7) :—					
(*a*) Insufficient	11	11	—	3	—
(*b*) Unsuitable or defective ..	33	30	—	8	—
(*c*) Not separate for sexes ..	1	1	—	1	—
Other offences against the Act (not including offences relating to Out-work)	3	3	—	1	—
Total ..	103	97	—	16	—

Part VIII of the Act
OUTWORK

	Section 110			Section 111		
	No. of out-workers in August list required by Section 110 (1) (*c*) (3)	No. of cases of default in sending lists to the Council (4)	No. of prosecutions for failure to supply lists (5)	No. of instances of work in unwholesome premises (6)	Notices served (7)	Prosecutions (8)
Wearing Apparel—Making, etc. ..	1	—	—	—	—	—
Textile Weaving ..	15					
Curtains & Furniture Hangings ..	4	—	—	—	—	—

Control of Atmospheric Pollution

This is an aspect of the public health inspectors' work which in recent years has given rise to increased comment by the Press and the public. Hitherto, control has been limited to taking action against industrial offenders under the provisions of the Public Health Act. Greater improvements are likely to be secured under the Clean Air Act of 1956, part of which became operative in July, 1957. It is now possible for areas of a town to be defined as "smoke control areas," within which, except for special exemptions, the only fuel burnt will be an authorised "smokeless" fuel. Thus, for the first time, atmospheric pollution from domestic premises comes within the ambit of general legislation. The law also provides, for the first time, that the local authority shall be notified of the intention to install new industrial appliances ; in certain circumstances the local authority may check and approve the installations and heights of chimneys.

Preparatory work was undertaken during the year, with a view to building up an organisation for implementing the Act when it is fully operative. The Council agreed to establish four new stations for the measurement of atmospheric pollution and to appoint an additional specialist inspector who will concentrate on the administration of the Act. It was not possible during the year to implement these administrative decisions.

Cardiff is singularly fortunate in the degree of atmospheric pollution to which it is subject. Nevertheless, complaints of local foci of pollution are fairly frequent. It was necessary during the year to carry out 291 observations and visits arising out of complaints of this nature.

Swimming Baths

There are four swimming baths owned by the Council and two baths in private ownership. These are inspected frequently and samples submitted to chemical analysis and bacteriological examination in order to secure effective control of the purity of the swimming bath water. A total of 394 samples were taken during the year. On the occasions when results were not satisfactory immediate steps were taken to investigate the cause and to advise as to remedial measures.

Tents, Vans and Sheds

Gypsies continued to occupy one private site adjoining common land from which they had previously been excluded by injunction. Their occupation of the land was unsatisfactory, not only in relation to the caravan site itself, but also the adjoining common land. At the close of the year, administrative steps were being taken which, it is hoped, will secure an improvement. The existence of the site necessitated 155 visits during the year.

Aged and Infirm Persons.—Numerous instances of aged people living alone under insanitary conditions were dealt with and help in the way of cleansing and supervision was provided in appropriate cases. No orders for compulsory removal were made but several persons were admitted to hospital voluntarily.

Pet Animals Act, 1951.—Licences were issued for 12 pet animal shops.

Shops Act, 1950

A total number of 1,206 visits were made to shops concerning all the various provisions of the Shops Act.

Complaints still continue to be received regarding alleged breaches of those provisions relating to hours of closing and Sunday trading. This is a troublesome part of the inspectors' duties because of the unsatisfactory nature of the Act itself and the difficulties of proving offences. This part of the work has no public health significance, but entailed the following work :—

Visits	..	..	48
Observations	..	Sunday Trading	62
Observations	..	Hours of Trading	41
Observations	..	Half-day Closing	393
Warnings	..	Weekly Half-holiday	17
	..	Closing Orders	3
	..	Assistants' Half-holiday	1
Prosecutions	..		10
Total Fines	..	£16 19s. 6d.	

Pharmacy and Poisons Act, 1933.—During the year 214 licences were renewed and 7 new licences were issued.

Water Supply.—The Water Engineer has provided the following information :—

(i) The quality and quantity of the water have been satisfactory.

(ii) Bacteriological examinations are made of the raw and treated water. The total number of samples taken was 991, and the reports made by the Public Health Laboratory showed the bacterial quality of the water to be satisfactory. Chemical analyses of the water indicate the chemical and physical characters to be of good quality for drinking water.

(iii) Chemists who have been consulted have made authoritative statements that the danger of plumbo-solvency in the Cardiff supply is negligible. Added precautions are taken by way of controlling the alkalinity of the water.

(iv) All drinking water is sterilised by chlorine treatment.

(v) It is estimated that there are approximately 85,200 separately rated dwelling places supplied within the area of supply, and the population served is estimated at 307,000.

FOOD AND MILK

Meat Inspection.—All slaughtering, with the exception of a private slaughterhouse in connection with a Bacon Factory, is carried out at the Public Abattoir under the supervision of the Veterinary Officer. Carcases at the private slaughterhouse are inspected by the Public Health Inspector for the district. During the year 4,530 pigs were slaughtered at this slaughterhouse, tuberculosis being found in 17 instances, a proportion of 0.4 per cent. The total weight of unsound meat (including offal) surrendered, was 12 cwts. 85 lbs.

Knackers Yard.—The only Knackers Yard in the City is regularly inspected and no difficulties were experienced during the year.

Offensive Trades.—Eight offensive trades are established in the City which include gut scrapers, tripe boilers and rag and bone dealers. These are kept under regular observation.

Ice Cream.—There are 18 firms or persons registered for the manufacture of ice cream ; of these only 12 are manufacturing at the moment, 6 producing a hot mix and the remainder a cold mix. Of the 695 retailers of ice cream only 34 sell it loose, the remainder selling wrapped ice cream only.

15 samples of ice cream were taken for bacteriological examination and of these 14 were in Provisional Grade 1 and 1 in Provisional Grade 3.

Food Hygiene.—In addition to the registered food premises of which particulars are given in other portions of this report, the number of established businesses in other food trades is as follows :—

Butchers	246
Bakers and Confectioners	112
Cafes and Restaurants	175
Greengrocers and Fruiterers	357

Public Health Inspectors made 8,512 visits to restaurants, food preparing places, shops, stores, markets, etc. in the City in connection with the hygienic condition of the premises and the inspection of foodstuffs. The approximate weight of diseased or unsound food surrendered as unfit was 28 tons 16 cwts. 2 qrs. 14 lbs. and 14 notices were served for the remedy of insanitary conditions.

During the year further large batches of liquid frozen egg were received at Cardiff Cold Stores. Systematic sampling procedure was again carried out—a difficult process due to the extremely cold conditions and the problem of sorting out one batch from another. Many batches were found to contain Salmonella organisms and were destroyed or released on condition that they were subjected to special processing.

Propaganda in the way of talks to various organisations was again a prominent feature. This branch of the work is extending and is all to the good because it enables the Public Health Inspector to secure more co-operation and assistance from the public in matters affecting the public health.

Several Public Health Inspectors, students and others from countries overseas attended the Department for the purpose of seeing how public health administration is carried on in this country.

Details of Premises registered under Section 47, Cardiff Corporation Act, 1934 :—

Manufacture of Ice Cream	18
Sale of Ice Cream	707
Manufacture of Meat Products	112
Dairies (Milk Roundsmen)	67
Shops selling Bottled Milk	264
Fried Fish Shops	74
Pasteurising Plants	5
Sterilising Plants	1

The number of inspections of these premises were :—

Ice Cream Premises	675
Meat Products premises	351
Dairies and Milkshops	716
Fried Fish Shops	162

MILK SUPPLY

Excluding those selling bottled milk only, there are 67 dairies on the register whilst there are 264 shops registered for the sale of bottled milk.

Five firms are now producing pasteurised milk in local dairies. Of these 2 are using the Holder Process and 3 the H.T.S.T. process. One firm is producing Sterilised Milk.

Six hundred and thirty-nine samples of Pasteurised Milk were taken to ascertain whether the standard was being maintained; (from the dairy or on the round), 611 samples were in every respect satisfactory, 26 failed to comply with the Methylene Blue Tests, and 2 failed on the Phosphatase Test. In all cases where samples failed to comply with the standard follow-up visits were made by Public Health Inspectors.

One hundred and fifty samples of T.T. (Pasteurised) Milk were taken, 4 failed the Methylene Blue Test. Seventy-six samples of Sterilised Milk were taken, 67 proved to be satisfactory, 9 were slightly low in S.N.F.

Of 92 samples of Tuberculin Tested Milk examined, 84 were up to standard and 8 failed the Methylene Blue Test.

Forty-one samples of Tuberclin Tested Milk were submitted for biological examination 37 found to be satisfactory, 2 failed Methylene Blue Test; 2 results unobtainable owing to temperature conditions prevailing at the time. Fourteen samples of Channel Island Milk were submitted for biological examination, 13 were found to be satisfactory, 1 failed Methylne Blue Test.

Samples of milk delivered under contract to schools and hospitals were taken regularly, also a close watch was kept on processing depots using well water. Where well water is available its use is restricted to those parts of the process such as cooling, etc., where it cannot come into contact with the milk or milk utensils.

LEGAL PROCEEDINGS (FOOD AND DRUGS)

Acts, etc., under which proceedings were taken	Number	Fined	Cautioned	To pay Costs	Dismissed	With-drawn	Amount of Fines and Costs
							£ s. d.
Food and Drugs Act, 1938	2	1	—	—	—	1	10 0 0

IX—Report for 1957 of

J. H. M. HUGHES, M.R.C.V.S., D.V.S.M., F.R.S.H.,

Veterinary Officer

The Veterinary and Abattoir Section of the Department involves :—

(1) The General administration of the Diseases of Animals Act, 1950 and all Statutory Orders made thereunder in relation to the City of Cardiff.

(2) The inspection of livestock, meat and by-products at Roath Abattoir.

(3) The granting of veterinary health certificates for meat products intended for export.

(4) The certification of disinfection of packing straw used in exported merchandise.

(5) Veterinary attention to livestock at Whitchurch Hospital farm.

(6) Veterinary services to the City Police Department in connection with the Protection of Animals Act, 1911.

(7) The supervision of the management and general administration of Roath Abattoir and Meat Market.

DISEASES OF ANIMALS ACT AND ORDERS

The Act enables the Ministry of Agriculture, Fisheries and Food to make Orders for the control or eradication of certain infectious diseases which are, or may be, the cause of serious losses to agriculture or a danger to public health. The diseases now scheduled and notifiable under the Act are Anthrax, Foot and Mouth Disease, Swine Fever, Fowl Pest, certain forms of Tuberculosis, Atrophic Rhinitis, Sheep Scab, Parasitic Mange in horses, asses and mules, Sheep Pox, Cattle Plague, Contagious Bovine Pleuropneumonia, Glanders, Epizootic Lymphangitis and Rabies. The last eight named diseases are now non-existent in Great Britain. The Act further provides for the control of Epizootic abortion, Warble Fly Infestation, the complete elimination of tuberculosis in cattle and for the care and comfort of animals in transit by rail, sea, air and road.

Swine Fever Order, 1938.—During the year seven suspected cases of the disease were investigated. Of these one case was confirmed by the Ministry of Agriculture, Fisheries and Food and the usual procedure under the Order implemented. Notice Form B under the Order was served on an adjoining pig keeper but the disease did not spread beyond the Infected place.

Regulation of Movement of Swine Orders, 1954 and 1955.—At the weekly sales at Ely livestock market 115 licences were granted for the movement of 370 pigs to Roath Abattoir and piggeries within the City and 127 licences for 370 pigs to slaughterhouses and premises outside the City. In addition 607 licences were received from other authorities authorising the movement of 12,742 pigs to Roath Abattoir and City piggeries from markets outside Cardiff. The assistance of the City Police was welcomed in visiting private premises to which pigs were licensed during the subsequent twenty-eight days compulsory detention.

Anthrax Order, 1938.—Material from thirty animals which died in lairs was specifically examined for the disease and all were found negative.

Rabies Order, 1938.—The introduction of the disease, which had been extinct in Great Britain since 1922, by illegally imported dogs is always a matter of concern in a port town. During the year 41 dogs reported by the City Police as having bitten persons were examined and found free from communicable disease.

Foot and Mouth Disease (Infected Areas Restrictions) Orders 1938–1956.—At the beginning of the year 6 areas were under restrictions imposed in 1956. These restrictions were removed in January and during the year 46 new infected areas were declared as a result of outbreaks of the disease. Eight areas remained under restrictions at the end of the year.

Foot and Mouth Disease Orders 1928–1938.—184 outbreaks of the disease were confirmed in Great Britain during the year which involved the slaughter of 30,432 animals. No restrictions were imposed on the movement of animals on account of the disease in the City.

Diseases of Animals (Boiling of Animal Foodstuffs) Order, 1947.—A total of 49 visits were made to pig keepers' premises for the inspection of boiling facilities. In all cases the order was duly obeyed.

Diseases of Animals (Waste Foods) Order, 1957.—The Order came into operation on 1st June 1957 and revoked the following :

(a) Diseases of Animals (Boiling of Animal Foodstuffs) Order, 1947 :

(b) Diseases of Animals (Licensing of Waste Food Sterilisation Plant) Order, 1954 :

(c) Foot and Mouth Disease (Disinfection of Road Vehicles) Order, 1941 :

(d) Foot and Mouth Disease (Disinfection of Road Vehicles) (Amendment) Order, 1942.

The Order imposes an obligation on local authorities to inspect, and if considered desirable, to license boiling plants used for cooking waste foods intended for feeding to pigs and poultry. 56 plants in the City licensed by the Ministry of Agriculture, Fisheries and Food under (b) above were exempted from further licensing by the local authority.

During the remainder of the year 145 visits were paid to pig and poultry keepers' premises and as a result 39 licences were recommended and granted for boiling plants.

The Animals (Landing from Channel Islands, Isle of Man, N. Ireland and the Republic of Ireland) Order, 1955.—During the year a total of 603 Irish cattle were licensed to Roath Abattoir from the ports of Fishguard and Birkenhead.

Prohibition of Landing Animals, Carcases, Animal Products and Hay and Straw from the Channel Islands, Order, 1957.—In consequence of an outbreak of Foot and Mouth Disease in the Island of Guernsey the Order was made operating from 26th March, 1957.

Prohibition of Landing Animals, Carcases, Animal Products and Hay and Straw from the Channel Islands (Revocation) Order, 1957.—The Order revoked the previous order with effect from 19th April, 1957.

Prohibition of Landing Animals, Carcases, Animal Products and Hay and Straw from the Channel Islands (No. 2) Order, 1957.—Owing to a further outbreak of Foot and Mouth Disease in the Islands the Order was made operating from 25th May, 1957.

Prohibition of Landing Animals, Carcases, Animal Products and Hay and Straw from the Channel Islands (Revocation No. 2) Order, 1957.—The Order was made, revoking the previous Order, operating from 26th July, 1957.

The Importation of Horses, Asses and Mules Order, 1957.—The Order revokes the Importation of Horses, Asses and Mules (Great Britain) Order, 1938. It demands the production of veterinary certificates on the import of such animals except those intended for a stay of 14 days for racing, exhibition or competition.

Exported Cattle Protection (Amendment) Order, 1957.—The Order gives further protection to cattle sent by sea and air from Great Britain.

Transit of Animals Orders 1927–1947.—Daily visits were paid to Roath cattle sidings and nine visits to Fairwater sidings in connection with the Order.

The Live Poultry (Restrictions) Order, 1957.—The Order revoked

(a) The Live Poultry (Restrictions) Order, 1954 ;

(b) The Live Poultry (Restrictions) (Amendment) Order, 1954 ;

(c) The Live Poultry (Restrictions) (Amendment) Order, 1956.

The Order confines the sale of live poultry, apart from those conducted on breeders' premises, to licensed auction sales. It also provides for the licensing of exhibitions and shows by the local authority.

Under the conditions of the Order, the licence held in respect of Ely Market for the sale of store poultry was revoked for the months of October, November and December.

Poultry Premises and Vehicles Disinfection Order, 1956.—Twenty-one visits were paid to the premises of poultry slaughterers and dealers.

The Fowl Pest (Infected Areas) Restrictions Order, 1956.—At the beginning of the year one area in Mid Lancashire was under restrictions imposed during 1956. Two new infected areas were declared as a result of further epidemics of Newcastle Disease. Owing to the persistence of the disease in the Mid Lancashire area it was not possible to remove the restrictions, this being the only area so restricted at the close of 1957.

Parrots and Miscellaneous Birds (Prohibition of Importation) Order, 1953.—The s.s. Thistledale was visited at Cardiff docks in connection with the alleged illegal landing of two prohibited birds. A search for the birds proved futile and the matter was handed over to the C.I.D. of the City Police and the Chief Preventive Officer, Customs and Excise, was notified. One prohibited bird found on board was destroyed with the consent of the Master.

City of Cardiff Sheep Dipping Regulations, 1953.—During the prescribed period, which ended 15th September, the dipping of 168 sheep on three farms in the City was witnessed.

Markets, Sales and Lairs Orders, 1925–1927.—All the weekly sales of livestock at Ely Market were visited in connection with these Orders.

The Tuberculosis (Attested Herds) Scheme, 1950.—The scheme was instituted with the object of achieving the complete elimination of bovine tuberculosis by means of the tuberculin test. Rapid progress has been made and it is expected to have bovine tuberculosis, for all practical purposes, eradicated within four years. The progress of the scheme is indicated by the below mentioned numbers of attested herds in Great Britain for the various years.

	England	Wales	Scotland	Total
31st December, 1957 ..	106,893	36,451	42,199	185,543
31st December, 1956 ..	93,087	35,346	39,308	167,741
31st December, 1955 ..	81,869	33,949	36,259	152,077
31st December, 1954 ..	67,007	32,018	33,208	132,233
31st December, 1950 ..	25,814	15,543	13,688	55,045

East Glamorgan, Monmouthshire and Herefordshire became a free testing area on 1st March, 1957 with a view to it becoming an Eradication Area on 1st March, 1959. A survey of farms in the City showed that only two owners failed to avail of the free test at the end of the year. One of these is due to quit inside twelve months. The following orders were made during the year in connection with the Scheme.

The Tuberculosis (Yorkshire Eradication Area) Order, 1957 ; The Tuberculosis (S. England Eradication Area) Order, 1957 ; The Tuberculosis (N. Wales Eradication Area) Order, 1957 ; The Tuberculosis (N. Scotland Eradication Area) Order, 1957.—The Orders which came into operation on the 1st March, 1957 entailed the compulsory testing of all untested cattle in the areas mentioned in the Schedules to the Orders and the subsequent slaughter of reactors found.

The Tuberculosis (Wales Attested Area) Order, 1957 ; The Tuberculosis (S. England Attested Area) Order, 1957 ; The Tuberculosis (North, West, Central, Forth and S.W. Scotland Attested Area) Order, 1957 ; The Tuberculosis (N.W. England Attested Area) Order, 1957.—Bovine Tuberculosis has, for all practical purposes, been eliminated from these areas which have been declared "Attested." Special conditions apply to the movement of bovine animals into and within the areas.

SUMMARY OF OUTBREAKS OF SCHEDULED DISEASES IN GREAT BRITAIN FOR THE YEARS 1954—1957

	1957	1956	1955	1954
Anthrax	318	1,245	764	350
Foot and Mouth Disease	184	162	9	12
Fowl Pest	1,034	956	906	795
Swine Fever	960	741	1,403	1,455
Atrophic Rhinitis ..	9	11	8	4

Protection of Animals Act, 1911

All work under this Act was carried out at the request of the City Police. During the year 4 horses, 27 dogs, 6 cats, victims of street accidents, were attended. Of these, 3 horses, 15 dogs and 3 cats were destroyed and the remainder treated for injuries.

Riding Establishments Act, 1939

Two riding establishments which hire horses were visited. The horses in stables were examined in accordance with Section 1 of the Act and found in good sound condition.

Performing Animals (Regulation) Act, 1925

In accordance with Section 3 of the Act the performing animals exhibited at one circus were examined.

Veterinary Services to other Departments

City Police Department.—Seventy-eight visits were made to examine animals at the request of the City Police.

Whitchurch Mental Hospital Management Committee.—By virtue of a financial arrangement veterinary attention is given to all livestock owned by this Committee. During the year 29 visits were paid to Whitchurch Hospital Farm.

MEAT INSPECTION SERVICE

The service entails the employment of four full-time Meat Inspectors with the Veterinary Officer acting as Chief Meat Inspector. With the exception of one bacon factory, all animals intended for human consumption are slaughtered at Roath Abattoir where meat inspectors are on duty at all times during slaughtering operations.

It is to be noted that Roath Abattoir serves a large consuming public outside the City, such as Penarth, Whitchurch, Caerphilly and Abertridwr.

All animals arriving for slaughter are subjected to veterinary antemortem inspection which serves the useful purpose of detecting any unfit animals which are subject to a special inspection and possible detention after slaughter for bacteriological examination. Furthermore, cases of scheduled disease can be found at once and dealt with under the various Orders before contamination of the slaughterhouse results.

MEAT INSPECTION STATISTICS

Carcases and Offal Inspected and Condemned in Whole or in Part
(Revised Form as set out by Ministry of Health)

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	9,128	4,004	10,630	60,154	27,383	Nil
Number Inspected	9,128	4,004	10,630	60,154	27,383	—
All Diseases except Tuberculosis and Cysticercosis : Whole carcases condemned ..	29	2	42	49	61	—
Carcases of which some part or organ was condemned	436	233	193	2,945	1,116	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	4·77	5·81	1·81	4·11	4·07	—
Tuberculosis Only Whole carcases condemned ..	10	18	3	1	11	—
Carcases of which some part or organ was condemned	426	597	4	Nil	384	—
Percentage of the number inspected affected with Tuberculosis ..	4·66	14·91	0·03	0·001	1·40	—
Cysticercosis Carcases of which some part or organ was condemned	18	9	Nil	Nil	Nil	—
Carcases submitted to treatment by refrigeration	18	9	Nil	Nil	Nil	—
Generalised and totally condemned ..	Nil	Nil	Nil	Nil	Nil	—

Animals Slaughtered—Comparative Table

	Year					
	1957	1956	1955	1954	1953	1939
Cattle ..	13,132	10,893	8,210	12,062	13,581	6,693
Sheep ..	60,154	61,344	59,325	75,891	55,935	53,632
Calves ..	10,630	10,463	9,238	4,892	2,353	7,788
Pigs ..	27,383	24,983	29,749	29,545	9,610	25,257
Total ..	111,299	107,683	106,522	122,390	81,479	93,370

TABLE SHEWING INCIDENCE OF TUBERCULOSIS IN ORGANS

Animals Slaughtered			Organs affected with Tuberculosis	Percentage	Percentage for 1956
Cattle	Bulls ..	129	4	3·10	7·50
	Cows	4,004	597	14·91	13·78
	Heifers/Steers ..	8,999	426	4·73	6·30
Calves		10,630	4	0·03	0·03
Sheep		60,154	1	0·001	nil
Pigs		27,383	384	1·40	1·80

TABLE SHEWING INCIDENCE OF CYSTICERCUS BOVIS

Number of Cattle slaughtered	Number of Cases of Cyst. Bovis.	Percentage of Infestation	Total Percentage	Percentage for 1956
Cows 4,004	9	0·22	0·20	0·08 } 0.12
Other Cattle .. 9,128	18	0·19		0·14

Condemnation Certificates.—463 Certificates were granted in respect of condemned carcases and offals at Roath Abattoir during the year 1957.

TABLE SHEWING CAUSES OF REJECTION OF CARCASES AND PART CARCASES

	Cattle		Calves		Sheep		Pigs	
	Total	Part	Total	Part	Total	Part	Total	Part
Tuberculosis	28	76	3	—	1	—	11	324
Oedema and/or emaciation	23	—	5	—	25	—	8	—
Traumatism	1	15	—	1	3	9	1	18
Septic Conditions ..	1	4	2	3	—	16	7	27
Decomposition	1	23	—	—	2	11	—	7
Fibrosis	—	3	—	—	—	—	—	—
Nephritis	—	5	—	—	—	—	—	—
Gangrene	—	—	3	—	—	—	—	—
Fevered, Moribund, Ill-bled	2	—	14	—	16	—	20	—
Pleurisy, Acute Septic ..	—	—	1	—	—	—	3	—
Pneumonia, Acute Septic	—	—	2	—	—	—	9	—
Metritis, Acute Septic ..	2	—	—	—	1	—	—	—
Peritonitis, Acute Septic	1	—	—	—	1	—	7	—
Joint Ill	—	—	2	—	—	—	—	—
Arthritis	—	1	1	—	—	6	—	76
Immaturity	—	—	6	—	—	1	—	—
Jaundice	—	—	4	—	—	—	4	—
Bone Taint	—	90	—	2	1	4	—	1
Pyaemia	—	—	2	—	—	—	—	—
Urticaria	—	—	—	—	—	—	1	1
Lipomatous Atrophy ..	—	—	—	—	—	—	—	1
Total ..	59	197	45	6	50	46	72	455

Weight of Meat and Offal Rejected from Animals Slaughtered at Roath Abattoir

	Tons	Cwts.	Qrs.	Lbs.
59 Carcases Beef	12	1	1	3
45 Carcases Veal	—	17	3	21
50 Carcases Mutton ..	—	15	—	11
72 Carcases Pork ..	3	—	3	22
197 Part Carcases Beef ..	7	11	—	6
6 Part Carcases Veal ..	—	1	1	11
46 Part Carcases Mutton ..	—	4	1	3
455 Part Carcases Pork ..	2	1	2	21
Cattle Offal	22	19	1	1
Calf Offal	—	11	2	12
Sheep Offal	5	—	3	26
Pig Offal	2	9	3	21
Total ..	57	15	1	18

Weight of Meat and Offal Rejected ex Other Slaughterhouses

	Tons	Cwts.	Qrs.	Lbs.
37 Part Carcases Beef ..	1	5	2	15
1 Part Carcase Veal ..	—	—	—	15
20 Part Carcases Mutton ..	—	6	3	4
59 Part Carcases Pork ..	—	5	3	—
Beef Offal	2	3	2	19
Sheep Offal	—	1	2	9
Pig Offal	1	4	1	13
Total ..	5	7	3	19

Total Meat and Offal Rejected at Roath Market during 1957

63 Tons 3 cwts. 1 Qr. 9 lbs.

Number of Diseased Organs Rejected

	Cattle	Calves	Sheep	Pigs
Heads :—				
Tuberculosis	—	—	—	—
Other Conditions	99	—	—	—
Heads (Including Tongues) :—				
Tuberculosis	568	4	1	322
Other Conditions	117	121	2,166	26
Lungs :—				
Tuberculosis	838	—	—	—
Other Conditions	282	—	—	—
Hearts :—				
Tuberculosis	754	—	—	—
Other Conditions	236	—	—	—
Skirts :—				
Tuberculosis	342	—	—	—
Other Conditions	119	—	—	—
Livers :—				
Tuberculosis	169	—	—	—
Other Conditions	2,859	45	2,247	480
Plucks :—				
Tuberculosis	—	4	1	90
Other Conditions	—	97	628	484
Tripes :—				
Tuberculosis	53	—	—	—
Other Conditions	96	—	—	—
Tails :—				
Tuberculosis	28	—	—	—
Other Conditions	119	—	—	—

ROATH MARKET ADMINISTRATION

The numbers of the various species of animals slaughtered at the Municipal Abattoir is given in the Meat Inspection section of the report which show an increase of 2,239 cattle, 2,400 pigs and 167 calves with a decrease of 1,190 sheep on the 1956 figures. The overall increase in stock handled is gratifying in face of the keen competition offered by other wholesale depots in the City to which fresh meat is consigned from slaughterhouses outside the City. The slaughtering facilities were adequate for the numbers of stock presented but the lairage accommodation for cattle and sheep was taxed to the limit. Provision is made for additional lairage during the coming year which should meet existing requirements.

Sunday slaughtering has been a matter of topical interest throughout the country during the year. It is generally deplored on the grounds of increased operating costs and the demand put on meat inspectors. It is interesting to note that an amendment has been tabled to the Slaughterhouses Bill, at present before Parliament, seeking to prohibit Sunday slaughtering, except under certain conditions to be approved by the Minister. The absence of chilling facilities at Roath Market has curtailed the slaughter of animals on Fridays and Saturdays in warm weather and wholesalers were compelled to seek authority for Sunday slaughtering in such weather so as to compete adequately with outside wholesale depots. Cardiff City Council permitted the slaughtering of cattle on Sundays during the summer which was in addition to the authority to slaughter sheep already given. During the year 688 cattle and 11,932 sheep were slaughtered at the abattoir on Sundays. Attempts have been made to compensate for the absence of cooling rooms by an improvement in through ventilation and the provision of overhead fans.

During the year the City Council approved a resolution of the Public Works and Town Planning Committee that the abattoir be resited in the Docks area. The decision has tempered the requests for improved facilities on a major scale. No progress was made by the end of the year on the new venture which will require serious consideration bearing in mind the abattoir serves essentially wholesale interests.

Drafts of the Slaughter of Animals (Prevention of Cruelty) (Amendment) Regulations and of the Slaughterhouse (Hygienic Construction) Regulations were published during the year. Both sets of regulations must await enabling legislation before being put into effect. In the event of the regulations becoming statutory considerable structural alterations and the provision of new plant will be necessary at the existing site if the new project is not put in hand during the period of grace laid down in the draft regulations.

Slaughter of Animals Acts, 1933 to 1954.—During the year 4 licences and 48 renewals of licences were granted by the City Council to persons authorising them to stun and slaughter animals in slaughter-houses and knacker yards.

X—Report for 1957 of

Mr. STANLEY DIXON, M.Sc., F.R.I.C., Public Analyst

The total number of samples examined during the year was 3,026, which is the highest number yet recorded for the laboratory. This is a very considerable increase over the corresponding figure for the year 1956, which was the previous highest, as will be seen in the table below which shows the numbers of samples examined during the first three full years in our new premises.

Total Number of Samples Examined

	1955	1956	1957
Under the Food and Drugs Act	1,598	1,990	2,078
Under the Fertilisers and Feeding Stuffs Act ..	32	50	45
Waters and Effluents	389	374	613
Miscellaneous	334	327	290
	2,353	2,741	3,026

The increase during the year 1957 was due almost entirely to a record number of water samples being submitted for examination, and indeed, this section of the work has far exceeded our anticipations as regards both numbers and scope.

For the first time for several years the staff has been maintained at its authorised establishment practically throughout the year. In December, however, Miss L. M. Clifford, B.Sc. resigned upon her marriage, after four and a half years of painstaking and reliable service in the laboratory, and on the clerical side Miss D. Agass left at the end of March, also to get married, and in April, Mrs. M. M. Dickson took her place. Dr. L. E. Coles passed the examination of the Royal Institute of Chemistry for the Diploma in the Chemistry and Microscopy of Foods, Drugs and Waters held in September, 1957 and in November, 1957 he was admitted to the Fellowship of the Royal Institute of Chemistry. I take this opportunity of acknowledging the loyal assistance I have received throughout the year from all the members of my staff.

I cannot leave these few personal notes without paying a brief tribute to my old colleague, Mr. W. G. Pyatt, M.B.E., with whom I worked for 29 of the 31 years that he served the Cardiff City Council as Chief Public Health Inspector. Few can have worked together so harmoniously over such a long period, and I welcome this opportunity of recording my gratitude to him for his unfailing interest in the work of the laboratory, his loyal co-operation during a period when great changes took place in legislation of mutual interest, and above all for his much valued personal friendship. I am sure that the close co-operation which existed during these years between the laboratory staff and Mr. Pyatt and his staff has been a very important factor in the effective enforcement of the provisions of the various acts and orders dealing with food and drugs and many other matters of mutual concern. May he long enjoy his well-earned retirement.

The laboratory continues to carry out analytical work required by the Swansea County Borough Council, and the following table shows the numbers of samples examined for both the Cardiff and Swansea Authorities and the headings under which they were classified :—

For the City of Cardiff :

Under the Foods and Drug Act	1,470	
Under the Milk (Special Designation) Regulations	77	
For the Port Health Authority	15	
Under the Fertilisers and Feeding Stuffs Act	21	
For the Public Health Department	312	
For the City Surveyor's Department	4	
For the Waterworks Department	315	
From other sources	22	
	——	2,236

For the County Borough of Swansea :—

Under the Food and Drugs Act	608	
For the Public Health Department	146	
For the Weights and Measures Department—Under the Fertilisers and Feeding Stuffs Act	24	
For the Borough Engineer's Department	5	
For the Waterworks Department	7	
	——	790
TOTAL ..		3,026

A separate report on the work carried out for the County Borough of Swansea is made to the Swansea Health Committee.

FOOD AND DRUGS LEGISLATION

Legislation relating to the composition and labelling of food and drugs, the wholesomeness of food, and food hygiene is contained in the Food and Drugs Act, 1955 and in Regulations, Statutory Instruments and Statutory Rules and Orders made under or kept in force by this Act.

Since the repealed Food and Drugs Act of 1938 was drafted great changes have taken place in the food industry. Many new synthetic chemicals have been used or recommended for use in the preparation and processing of food, and the 1955 Act contains, *inter alia*, new provisions against the sale of food containing injurious or other undesirable ingredients, particularly those with cumulative effects, and against harmful technological processes.

The main legislation having thus been brought up to date, the Minister of Agriculture, Fisheries and Food is now reviewing some of the older Regulations and Statutory Instruments and Orders with the object of ensuring that they take account of modern views, practice and conditions. During the year under review new Public Analysts Regulations were made and brought into operation. These Regulations prescribe the qualifications required by persons appointed to be Public Analysts and they also lay down the form of certificate of analysis to be used. While the qualifications remain unchanged, the form of certificate to be used has been revised and it gives effect to some new provisions of the 1955 Act. Very careful consideration has also been given to the subject of colouring matter in food, and a brief account of the investigations made is given below.

Colouring Matter in Food.—The practice of colouring food is very old. References are made by Pliny the elder to the colouring of wine, and the colouring of spices and condiments was practised some 500 years ago. Colours were probably first introduced into foods to mask a deficiency of ingredients such as eggs, butter, chocolate and fruit, or to improve the appearance of some product the original colour of which had deteriorated during manufacture or storage. Their main purpose today is to give a more attractive appearance to foods.

Until the middle of the 19th century the only colouring matters available were derived from natural sources, and comprised mineral pigments and colours of animal or vegetable origin. In the latter half of that century the so-called " coal-tar " colours, discovered about 1850, began to be used in foods. These coal-tar dyes provided a much wider range of colours of high tinctorial power and of greater brilliance than those hitherto used. Their use rapidly gained favour with food manufacturers and at the present time they have largely replaced the natural colours.

Soon after the introduction of coal-tar colours as food additives, the question was raised whether from the toxicological standpoint, they were suitable for use in foods, and a number of countries controlled their use by legislation. In some (including both Canada and the U.S.A.), only a few specifically named synthetic colours were allowed ; in others, colours considered unsuitable for use in foods were banned.

In 1923, the Minister of Health appointed a Departmental Committee to enquire into the use of preservatives and colouring matters in food, and so far as the latter were concerned, the Committee recognised that while general permission to use any colour (with certain specified exceptions) might be convenient to the trade, this would allow the use of a very large number of dyes about which there was not adequate information as to their physiological action. The Committee therefore advised that the proper course was to consider each colouring matter individually and to approve its use only if the evidence demonstrated that it was harmless. The Government of the day did not accept this recommendation, however, and when the Public Health (Preservatives, etc. in Food) Regulations were made in 1925 they prohibited the use in food of three groups of colours then known to be harmful, viz. :—

(i) Compounds of any of the eight metals—Antimony, Arsenic, Cadmium, Chromium Copper, Lead, Mercury and Zinc.

(ii) The vegetable colouring matter—Gamboge.

(iii) Five specified yellow and orange coal-tar colours.

During the last twenty years evidence has accumulated which indicates that in addition to these five prohibited coal-tar colours there are some which may present a health hazard if used in food, and others having a similarity in chemical structure must be regarded with suspicion. Thus, for example, in 1937, Kinosita in Japan produced malignant tumours of the liver in rats by ingestion of the colouring matter known as " Butter Yellow," and in 1949 Peacock and Kirby, in Glasgow, found that the azo-dye " Orange Oil E," then used extensively for colouring margarine, produced a marked tumour of the liver in mice after subcutaneous injection of the dye in arachis oil. Although interpretation of these animal experiments is difficult and complex, until the contrary can be proved suspicion must fall on any colour proposed for use in foods which is capable of producing such reactions, and in 1950 a Joint Committee appointed by the Society of Public Analysts and the Food Group of the Society of Chemical Industry presented a memorandum to the Ministers of Food and Health proposing revision of the Preservatives, etc. in Food Regulations and recommending the replacement of the existing *prohibited* list by a *permitted* list of colours.

Following this memorandum, the Food Standards Committee appointed by the Minister of Food set up a Preservatives Sub-Committee with Sir Charles Dodds, M.V.O., M.D., D.Sc., F.R.C.P., F.R.I.C., F.R.S., as Chairman, to review the Preservatives, etc. in Food Regulations. The Report of this Sub-Committee on the subject of Colouring Matters was circulated in January, 1955, and after considering representations from the trade and other interests, a supplementary Report was presented in November, 1955.

The Sub-Committee realised that colour could be used to mask the use of inferior, ingredients or to give a false impression of quality, but considered it to be psychologically sound that food should be presented in as attractive a form as possible. The colouring of food has become so generally accepted that it is unlikely that the purchaser today is misled.

Without the addition of colour, many foods would have a drab, unattractive appearance, and provided there is adequate evidence that the colours used have no deleterious effects on health, they saw no objection to their use to replace natural colour lost during processing, to standardise appearance, or simply to render a product more attractive. Control must be designed, however, to safeguard public health as effectively as possible, but they considered that the Regulations of 1925, whereby almost all known synthetic colours could be used, were unsatisfactory and that the colours permitted to be used should be restricted to those for which harmlessness has been established by adequate biological tests.

After a Panel of the medical members of the Sub-Committee had carefully examined all the available pharmacological evidence bearing on some 79 colours which were either in use or had been suggested for use, and had reported thereon, the Sub-Committee made the following recommendations which were endorsed by the Food Standards Committee :—

That their tentative list of permitted colours be accepted for official approval,

The list of approved colours should be periodically reviewed—say 5 years,

Specifications of purity should be prescribed and published for each of the specified colours,

Colours (other than for marking purposes) should not be permitted to be used in milk, or in or upon meat, game, poultry, fish, fruit or vegetables sold in the raw or unprocessed state,

Food colours should be appropriately labelled and that, in general, notification of the presence in foods of added colour should be given to the purchaser, and

Any regulations made as a result of their recommendations should apply also to imported foods.

The Government accepted all these recommendations in principle, and indeed almost entirely in detail, and in June, 1957, they made the **Colouring Matter in Food Regulations, 1957,** which revoke the provisions of the Public Health (Preservatives, etc. in Food) Regulations, 1925, as amended, insofar as they relate to colouring matter in food. The main provisions of these new Regulations

(a) prohibit the sale or importation of food containing any added colouring matter other than—

30 specified coal-tar colours,

caramel and cochineal,

colouring matters natural to edible fruits and vegetables,

13 other specified colours of vegetable origin (including carotene, chlorophyll, indigo, safflower, saffron, sandalwood and turmeric) which may be the pure colouring principles or they may be of synthetic origin,

5 colours from mineral sources, viz., Bole or iron oxide, carbon black, titanium dioxide, ultramarine, and solely for the external colouring of dragees and the decoration of sugar-coated flour confectionery, silver or aluminium in leaf or powder form, and

the aluminium or calcium salts (lakes) of any of the scheduled water-soluble colours.

(b) prohibit the sale or importation of meat, game, poultry, fish, fruit and vegetables in a raw or unprocessed state having in or upon them (otherwise than for marking purposes) any added colouring matter at all, except that citrus fruit may have permitted colouring if marked distinctly and legibly on the skin with the words " colour added."

(c) prohibit the sale or advertising for sale of any food colouring matter which is not a permitted colouring matter and impose requirements as to the labelling of permitted colouring matter and colouring and flavouring compounds.

(d) provide that where certain food is certified by a public analyst as containing colouring matter not permitted by the Regulations, that food may be treated for the purpose of S.9 of the Food and Drugs Act, 1955, as being unfit for human consumption.

The Minister of Agriculture, Fisheries and Food has stated in the House of Commons that the list of permitted coal-tar colours will be reviewed in not more than 5 years' time, that the Government has decided that specifications of purity should be prescribed for colours on the permitted list and that the Committee's recommendations regarding the labelling or description of processed foods containing added colour will be considered when a comprehensive review of the Labelling of Food Order is undertaken.

The Regulations became law on the 30th June, 1957, but the principal provision did not come into force until 31st December, 1957 for sales by manufacturers, until the 30th June, 1958 for sales by wholesalers, and it will not apply to sales by retailers until the 30th June, 1959. The Minister has stated, however, that "the Government hope that all who can do so will take steps immediately to use only colours on the permitted list."

SAMPLES SUBMITTED UNDER THE FOOD AND DRUGS ACT, 1955

The total number of samples of food and drugs examined during the year for the City of Cardiff was 1,470. The fact that a sample is obtained under the provisions of the Food and Drugs Act does not prevent action being taken by appropriate Authorities under other legal enactments, and therefore, when the samples were examined and reported upon, consideration was given to all relevant legislation.

The nature of the various articles submitted, the number of each kind and the numbers that were adulterated or otherwise unsatisfactory are shown in the following table :—

Samples submitted under the Food and Drugs Act during 1957

Nature of Sample	Number examined	Number unsatisfactory
Baking Powder	3	—
Beverage Powder	3	—
Blancmange Powder	6	—
Bread	3	2
Bread and Butter	4	1
Butter	20	1
Cake	1	1
Cake and Sponge Mixtures	6	—
Cheese	3	—
Cheese, Processed	2	—
Cheese Spread	4	—
Cherries, Canned	3	2
Cherries, Glacé	3	—
Cocoa	12	—
Coffee	8	—
Coffee Extract, Dry	2	—
Coffee and Chicory Essence	2	—
Cooking Fat	3	—
Cornflour	2	—
Crab, Dressed	1	—
Crab Paste	1	—
Cream	4	—
Custard Powder	7	—
Dried Fruits (Currants, Raisins and Sultanas)	10	—
Drugs and Medicinal Preparations :—		
Almond Oil	2	—
Anti-fat Tablets	1	—
Aspirin Tablets	4	—
Bicarbonate of Soda	4	—
Blackcurrant Syrup	2	—
Boric Acid Ointment	2	—
Camphorated Oil	2	—
Castor Oil	2	—

Samples submitted under the Food and Drugs Act during 1957—continued.

Nature of Sample	Number examined	Number unsatisfactory
Drugs and medicinal preparations—*continued*		
Cod Liver Oil	2	—
Concentrated Orange Juice	1	—
Energy Tablets	1	—
Epsom Salts	2	—
Glucose Tablets	2	—
Glycerine	2	—
Halibut Oil	2	—
Hydrogen Peroxide	2	—
Iron and Yeast Tablets	1	—
Nicotinamide Tablets	2	—
Olive Oil	4	—
Phenacetin Tablets	2	—
Phenacetin and Caffeine Tablets	2	—
Potassium Bromide Tablets	2	—
Prescribed Medicine	2	—
Rose Hip Syrup	1	—
Rose Hip and Orange Syrup	1	—
Saccharin Tablets	2	—
Spirit of Sal Volatile	2	—
Surgical Spirit	1	—
Syrup of Hypophosphites	1	—
Teething Powders	2	—
Teething Preparations	1	—
Tonic Tablets	1	—
Vitamin B1 Tablets	2	—
Vitamin C Tablets	4	—
Vitamin Syrups, Compound	2	—
Yeast Tablets	2	—
Flour	2	—
Flour, Self-raising	4	—
Food Colouring Solutions	4	—
Fruit Tart	1	—
Golden Raising Powder	1	—
Ice-cream	16	—
Jam	7	—
Lard	13	—
Laver Bread	2	—
Lemon Curd	5	—
Margarine	16	1
Marmalade	1	—
Marzipan	2	—
Meat and Meat Products :—		
Chicken, Potted	1	—
Chicken, Ham and Mushroom (Vol-au-Vent)	1	—
Luncheon Meat	1	—
Meat Pudding, Canned	1	—
Ox Tongue, Canned	1	—
Sausages	10	5
Milk	940	52
Milk, Channel Islands	108	12
Milk, Appeal-to-cow Samples	12	2
Milk, Condensed	1	—
Mincemeat	2	—
Mustard	2	—
Pastry Mix	2	—
Peanut Butter	1	—
Pepper	7	—
Pudding Mixtures	3	—
Rice	3	—
Rice, Ground	1	—
Sage and Onion Stuffing	1	—
Sago	2	—
Salad Cream	5	—

Samples submitted under the Food and Drugs Act during 1957—continued

Nature of Sample	Number examined	Number unsatisfactory
Drugs and medicinal preparations—*continued*		
Salmon, Canned/Potted	2	—
Salmon Spread	2	—
Shrimps, Canned Peeled	13	8
Soft Drinks	13	—
Soup, Canned	8	—
Soup Powder	5	—
Spirits	6	—
Suet, Beef	2	—
Suet, Shredded Beef	2	—
Sugar, Icing	1	—
Sweets (Butter Toffees)	1	—
Table Jelly Crystals and Tablets	11	1
Tea	17	—
Tomato Juice, Canned	1	—
Tomato Sauce	16	2
Trifle Ingredients	3	—
Vinegar, Malt	5	—
TOTAL	1,470	90

Of the total of 1,470 samples submitted under the Food and Drugs Act, 90 or 6.1 per cent were reported upon adversely. In 1956 the proportion of unsatisfactory samples was 9.6 per cent and in 1955 it was 8.4 per cent.

Milk

The total number of milk samples submitted under the Food and Drugs Act during the year was 1,060. Of these 1,048 were taken in the usual way by the Sampling Officers from roundsmen, at wholesale dairies, and at schools, hospitals and other institutions while twelve were appeal-to-cow samples. Preservatives and added colouring matter were not found in any of the samples. The adulterated and otherwise unsatisfactory samples are classified in the tables below.

Ordinary Milk—940 samples

Number deficient in fat only	37 =	3·9%
Number containing added water only	13 =	1·4%
Number deficient in fat and containing added water	2 =	0·2%

Channel Islands Milk—108 samples

Number containing less than 4·0% of fat	12 =	11·1%
Number containing added water	—	—

Genuine Milk of poor quality

Number of samples of ordinary milk that contained less than 8·5% of non-fatty solids but showed no evidence of the presence of added water by the freezing-point test	147 =	15·6%

The freezing-point test confirmed the presence of added water in 15 samples of ordinary milk that contained less than the legal presumptive minimum of 8·5 per cent of non-fatty solids. In most cases the amount of extraneous water present was very small, which suggested careless draining of receptacles rather than deliberate adulteration, and the vendors were cautioned by the Chief Public Health Inspector. Two samples taken from different retailers, however, each contained 7 per cent of added water, and in both instances further samples were taken which showed that the adulteration was taking place at the farm of the producer. The farmers were interviewed by the Chief Public Health Inspector and, having regard to all the circumstances in these cases, they were both cautioned.

Most of the samples that contained less than the legal presumptive minimum of 3·0 per cent of fat were taken from supplies of raw milk delivered to dairies in the city and were described on the labels attached to the churns as morning milk. In many cases they were accompanied by samples of afternoon milk from the same cows and invariably these were rich in fat so that the fat content of the whole consignment averaged more than 3 per cent.

When there is a considerably longer interval between the afternoon milking and the next morning milking than there is between the morning and afternoon milkings of the same cows, it is generally found that the afternoon milk is small in quantity and rich in fat, while the morning milk is large in volume and low in fat content. This is the most common cause of the fat content of genuine milk falling below 3 per cent and it is particularly liable to occur in the Spring when the average fat content of milk is at its lowest during the year.

One hundred and forty-seven samples of milk contained less than the legal presumptive minimum of 8·5 per cent of non-fatty solids but had normal freezing points, thus indicating that they had not been adulterated by the addition of water but were naturally poor in solids-not-fat. This represents 15·6 per cent of the samples of ordinary milk. Sixty-seven of these naturally sub-standard samples, i.e. nearly half of them, were obtained during the first three months of the year, and the proportion of such samples in recent years has been as follows :—

Year	1953	1954	1955	1956	1957
Percentage ..	8·4	9·7	11·1	13·0	15·6

These figures strongly suggest that in this area the proportion of milk that is naturally sub-standard as regards non-fatty solids is gradually increasing, and the fact that most of such samples are obtained in the late winter and early spring months suggests that this deterioration in the compositional quality of milk is due in a large measure to producers failing to maintain adequately balanced rations for the herd at this time of the year.

In those cases where milk was found to be of exceptionally poor quality with no evidence of adulteration, the producers were recommended to seek advice from the National Agricultural Advisory Service.

Channel Islands Milk.—Milk for human consumption sold under the special designations Jersey, Guernsey, Channel Islands or South Devon Milk must be the produce of cows of the breed indicated by the name and must contain not less than 4·0 per cent of fat. An extra charge may be made for such milk.

During the year, 108 samples of Channel Islands Milk were examined, twelve of which were found to contain less than 4 per cent of fat. Eight of these were from a consignment of 18 churns sent to a large dairy by one producer, the average fat content of the whole consignment being 4·27 per cent. The other four also were from churns which were only part of the total consignments, and in each case the fat content of the whole consignment averaged not less than 4 per cent. It appears that most of the Channel Islands Milk received at the larger dairies is bulked and pasteurised before being bottled for distribution. In such cases, provided the fat content of the bulked milk is not less than 4 per cent., uneven distribution of the fat in the individual churns from a producer is of little moment, but occasionally some of the churns as supplied by the producer are sent to other retailers for bottling and distribution. It is necessary for the retailer to ensure that unprocessed Channel Islands Millk purchased from a wholesaler does in fact contain not less than 4 per cent of fat.

Appeal-to-Cow Samples.—These are samples of milk taken by a Sampling Officer after he has very carefully supervised the milking of the cows. They are obtained for comparison purposes where a previous sample from the same source has been found to be unsatisfactory and they show the composition and properties of the unadulterated milk given by the cows.

During the year, twelve such samples were obtained at three farms. Six of them were taken in connection with a sample that contained only 2·05 per cent of fat, and the results showed that the cows were producing milk of very poor quality, all six samples being low in non-fatty solids and two, which were morning milk, were also deficient in fat. The other six samples related to previous samples in which low non-fatty solids and freezing point determinations had indicated added water. These appeal-to-cow samples fully confirmed this in both cases, though the milk as produced by the cows at one of the two farms concerned was of exceedingly poor quality, as had been anticipated from the results of analysis of the earlier samples.

Average Composition of Milk Samples.—The average composition of all the milk samples submitted during the year is given in the table below. The average composition of the Channel Islands Milk and of the " ordinary " milk samples (i.e. all samples other than Channel Islands Milk) is also shown.

Average Composition of Milk Samples, 1957

Variety	Number of Samples	Fat per cent	Non-fatty solids per cent	Total solids per cent
Channel Islands Milk ..	108	4·55	9·04	13·59
Other Milk samples ..	952	3·61	8·65	12·26
All Milk samples ..	1,060	3·71	8·69	12·40

It will be observed that the average composition of Channel Islands Milk is much superior to that of " ordinary " milk and the results from this variety are in accordance with the general finding that milk that contains a high percentage of fat also contains a high percentage of non-fatty solids.

The next table shows the monthly variations in the composition of all the milk samples other than those of Channel Islands Milk.

Milk Samples other than Channel Islands Milk
Monthly Variations, 1957

Month	Number of Samples	Fat per cent	Non-fatty Solids per cent	Total Solids per cent
January	76	3·76	8·57	12·33
February	87	3·39	8·51	12·10
March	70	3·52	8·45	11·97
April	104	3·41	8·64	12·05
May	89	3·37	8·67	12·04
June	73	3·55	8·56	12·11
July	81	3·60	8·61	12·21
August	41	3·56	8·69	12·25
September	74	3·66	8·82	12·48
October	88	3·67	8·80	12·47
November	99	3·89	8·73	12·62
December	70	3·79	8·68	12·47
Whole year	952	3·61	8·65	12·26

It will be observed that the fat content of the milk is at its maximum in the Autumn, it then falls gradually to a minimum in the Spring—generally in April or May, after which it gradually increases until the maximum is reached—usually in November. The non-fatty solids are at their highest in the early Autumn and in recent years they have fallen sharply towards the end of the Winter—doubtless the result of poor and/or unbalanced feeding of the cows.

The yearly compositional averages for the samples of milk other than Channel Islands milk for the last 23 years is given in the following table :—

Average Composition of Milk Samples (excluding Channel Islands Milk) 1935–1957

Year	Fat, per cent	Non-fatty solids per cent	Total solids per cent
1935	3·81	8·83	12·64
1936	3·77	8·74	12·51
1937	3·81	8·75	12·56
1938	3·67	8·74	12·41
1939	3·66	8·78	12·44
1940	3·68	8·64	12·32
1941	3·61	8·67	12·28
1942	3·64	8·67	12·31
1943	3·62	8·76	12·38
1944	3·65	8·74	12·39
1945	3·59	8·64	12·23
1946	3·65	8·67	12·32
1947	3·59	8·73	12·32
1948	3·55	8·70	12·25
1949	3·57	8·67	12·24
1950	3·55	8·74	12·29
1951	3·55	8·67	12·22
1952	3·51	8·69	12·20
1953	3·48	8·69	12·17
1954	3·52	8·67	12·19
1955	3·48	8·64	12·12
1956	3·50	8·64	12·14
1957	3·61	8·65	12·26

Attention has been drawn in previous reports to the steady decline in the average composition of the samples of milk other than Channel Islands milk that has occurred since the year 1935. The minimum figures for both fat and solids-not-fat occurred in the year 1955. In 1956, there was a very slight increase in the average fat content, but the non-fatty solids remained at the 1955 average and the change could not be regarded as significant In 1957, however, there was a pronounced increase in fat content, though the solids-not-fat content was not significantly different from that of the two preceding years, and it must be emphasised that no less than 15·6 per cent of the samples of ordinary milk failed to reach the legal minimum presumptive limit of 8·5 per cent of solids-not-fat.

In 1951, a Working Party was appointed by the Government " to examine the present structure of producers' prices for milk and to advise whether it is desirable and practicable to make revisions which would promote an improvement in the composition and quality of milk sold off farms in the United Kingdom." Their report was published in 1953 when the Working Party came to the conclusion that—

" There has been some deterioration in the composition of milk in England and Wales over the past 30 years and that the decline in solids-not-fat has been more marked than that in fat. We consider, however, that there is also evidence to suggest that the decline has been arrested, at least in some areas. Nevertheless, **milk of poor compositional quality is still being produced throughout the year by too many producers.** In the early spring and occasionally at other seasons, substantial quantities of milk in many parts of England and Wales fall below the presumptive minimum standards. **There is therefore no cause to be satisfied with the present level of milk quality in England and Wales and every reason for taking steps to improve it."**

The Working Party rejected on economical grounds a suggestion of payment for milk on a quality basis instead of by volume regardless of quality, as at present, and recommended a scheme involving regular testing of farmers' supplies coupled with an advisory service, which would deal in the first place with producers found to be sending in milk below the legal presumptive limits of 3·0 per cent of fat and 8·5 per cent of solids-not-fat, the ultimate sanction, if the advice was not acted upon or the composition of the milk did

not improve in a reasonable time, being cancellation of the producer's contract with the Milk Marketing Board. The Report of the Working Party was summarised in the Cardiff Health Report for 1953 (pp. 63–66), and the scheme devised for improving the compositional quality of milk was outlined in more detail in the Cardiff Health Report for 1956 (pp. 83 and 84). Under this scheme, which was brought into operation on the 1st October, 1956, each producer's milk is sampled and tested for fat and solids-not-fat contents at least once a month at one of the larger dairies and farmers are notified whenever the milk falls below the presumptive limits. At the end of the first year (30th September, 1957) producers were classified as satisfactory or unsatisfactory on the basis of the yearly average composition calculated from the monthly tests.

It may be that this policy is already having some effect on the composition of milk and that the small increase in the average fat content of the samples of milk taken in Cardiff during 1957 is due to the operation of the scheme in this area, but it appears to me that improvement is likely to be very slow and that much more rapid progress would be made if the Government gave notice that after a certain time (say 5 years) the present presumptive limits in the Sale of Milk Regulations would be made absolute standards. The Working Party did consider such a proposal, but it was rejected on the grounds that it would reduce the amount of milk available for liquid consumption and that " both producers and distributors would resent a departure from the traditional view that milk as it comes from the cow is genuine." The point of view of the housewife seems to have been relegated to the background. I am sure she would resent being supplied with milk of poor quality if she knew this to be the case. She buys milk for the nourishment of her family, and she is not concerned whether its poor quality is due to poor feeding of the cows, to natural causes or to adulteration of milk of better quality. The effect on the nutritive value of the milk is the same. So long as the limits in the Sale of Milk Regulations are " presumptive " only, and the law regards milk as genuine if it is " as it comes from the cow," they will encourage the breeding of milch cows for quantity rather than for quality. Indeed, such a policy may be regarded in some quarters as legitimate keen business.

Articles other than Milk

Four hundred and ten samples other than milk were submitted during the year. They covered a wide range of articles and particulars of the twenty-four samples (5·8 per cent) that were reported upon adversely are tabulated below.

Unsatisfactory Samples of Articles other than Milk

Article	Nature of Adulteration or Irregularity
Bread	Contained particles of coarse grit.
Bread	Pieces of black carbonised vegetable matter were embedded in the centre of the loaf.
Butter	Contained 16·4% of water, the legal limit being 16·0%.
Butter (on bread)	The spread was not butter but consisted of margarine.
" Butterfull Cake "	Contained only 3% of butter-fat, or less than 2/5 oz. of butter in the whole cake weighing 12 ozs. Only one-seventh of the total fat in the cake was butter-fat.
Cherries, Canned (2 samples)	Contained excessive amounts of tin, viz. 290 and 335 parts per million respectively, the maximum limit recommended by the Food Standards Committee being 250 parts per million.
Margarine	Contained 16·9% of water, the legal limit being 16·0%.
Pork Sausages (5 samples)	Meat contents were 48%, 55%, 57%, 59% and 64%, instead of at least 65% as recommended by the Food Standards Committee. Two of these samples also contained a sulphite preservative, the presence of which was not declared, contrary to the Preservatives in Food Regulations.
Shrimps, Canned, Peeled (8 samples)	Not of Merchantable quality, the drained shrimps being black in colour (instead of flesh-pink) due to heavy contamination with iron derived from the containers.

Unsatisfactory Samples of Articles other than Milk—continued

Article	Nature of Adulteration or Irregularity
Table Jelly Crystals	One of the declared constituents (described as a " flavour bud ") was missing from the packet and the sample failed to satisfy the setting test prescribed by the Food Standards (Table Jellies) Order.
Tomato Sauce	Contained only 3% of tomato solids instead of not less than 6% as prescribed by the Food Standards (Tomato Ketchup) Order, and the label did not bear a list of ingredients as required by the Labelling of Food Order.
Tomato Sauce	The label did not bear a list of ingredients as required by the Labelling of Food Order.

The table includes examples of irregularities in the labelling of pre-packed articles of food, contraventions of official or recommended standards of composition, instances of excessive metallic contamination, and the presence of extraneous matter in food.

Suitable action was taken by the Chief Public Health Inspector in respect of these unsatisfactory samples. Brief reference to some of these, and to certain other articles is made below.

Butter and Margarine.—One of four samples of " bread and butter " obtained in cafés proved to be bread and margarine. Legal proceedings were instituted against the vendors but these were subsequently withdrawn as there had been an irregularity in legal procedure at the time of service of the summons.

A slight excess of water was found in one sample of butter and one of margarine. These contained 16·4 and 16·9 per cent of water respectively compared with the maximum of 16·0 per cent permitted by the Butter and Margarine Regulations, 1955. The manufacturers of the margarine were cautioned, while further samples of the brand of butter concerned proved to be genuine.

Cake.—A sample described as " Butterfull Cake " contained 20·3 per cent of fat but only one-seventh of this was butter-fat. The cake, which weighed 12 ozs., contained less than two-fifths of an ounce of butter, which in my opinion is insufficient to justify the description " Butterfull." While consideration was being given to these findings, information was received that legal proceedings were being taken against the makers in respect of a sample of similar composition obtained by another Food and Drugs Authority. Although this case was dismissed by the magistrates, Mr. Pyatt subsequently informed the makers of my opinion and he was assured that in future this article would be labelled " Madeira Cake."

Cheese and Cheese Products.—In this country there is no legal standard for cheese, the definition in the Food and Drugs Act, 1955, being of a negative description, viz. : " the substance usually known as cheese, containing no fat other than fat derived from milk." There is, however, a general consensus of opinion that the unqualified term " cheese " should not be applied to a product made from skimmed milk.

Two samples of Caerphilly Cheese (taken in January and October, 1957) and one of Danish Blue Cheese were examined, the analytical results being as follows :—

Type of Cheese	Caerphilly	Caerphilly	Danish Blue
Water	40·6	41·1	41·2 per cent
Fat	30·4	29·5	33·3 ,, ,,
Fat in water-free substance ..	51·2	50·0	56·7 ,, ,,
Proteins (Nitrogen x 6·38) ..	24·5	24·4	19·3 ,, ,,

The figures indicate that all three cheeses were made from whole milk and that the samples of Caerphilly Cheese were very similar in composition to those examined before the war.

The composition of the samples of processed cheese and of cheese spread conformed to the recommendations of the Food Standards Committee of the Ministry of Agriculture, Fisheries and Food made in 1936, and the cheese spreads complied also with the recommendations as to the labelling of this article.

Ice-cream.—Ice-cream is required to contain not less than 5 per cent of fat, 7.5 per cent of milk solids other than fat, and 10 per cent of sugar, of which at least 7.5 per cent must be sucrose. During the year under review sixteen samples of ice-cream were submitted for chemical analysis and all of them were found to satisfy these requirements. Their fat contents ranged from 5·8 to 14·8 per cent, the average being 11·0 per cent which is the highest yearly average for fat since the manufacture of ice-cream was resumed after the war. The total solids ranged from 27·8 to 41·2 per cent, the average being 35·8 per cent. Only one of the samples contained starchy matter.

When the ice-cream standard was first introduced in 1951, it was announced that the Minister of Food regarded the standard as an interim one and that he proposed progressively to improve the quality as supplies of ingredients became more plentiful. Supplies having been freely available for some time, the Food Standards Committee of the Ministry of Agriculture, Fisheries and Food has reviewed the standard and in September, 1957 it recommended that the Food Standards (Ice-cream) Order, 1953 be amended :—

(a) to provide that the description " dairy ice-cream " may only be applied to ice-cream in which the whole of the fat is milk fat.

(b) to make provision for a " milk ice " that shall contain not less than 2·5 per cent of milk fat, not less than 7 per cent of milk solids-not-fat and no fat other than milk fat.

(c) to prohibit the use of saccharin in ice-cream and revoke the present provisions relating to sugar content.

(d) to prohibit the use of milk or milk products in " Parev " (Kosher) ice.

The Minister of Agriculture, Fisheries and Food has announced recently that he proposes, in conjunction with the Minister of Health, to make Regulations which will implement these recommendations.

Sausages.—The position with regard to this important commodity—it accounts for at least 10 per cent of the total weight of carcass meat consumed and the national expenditure on it is of the order £80—90 millions per year—remains unsatisfactory from the administrative point of view. The composition of sausages was controlled under Defence Regulations throughout the war until March, 1953, and at the time of decontrol, pork sausages were required to contain at least 65 per cent of meat and beef sausages at least 50 per cent.

Since more meat is now available for manufacturing purposes, it is generally considered that sausages ought not to contain less meat than during the period of control and many Food and Drugs Authorities have continued to use the minimum levels of meat content previously in force as the criterion for an acceptable sausage, and some successful prosecutions have been made on this basis. Recent High Court cases, however, have cast doubt on the status of these limits, and the prevailing uncertainty has been emphasised on more than one occasion by the Lord Chief Justice, who has pointed out that, until Ministers lay down a statutory definition of what a sausage is, the question will continue to be disputed in the Courts.

In May, 1956, the Food Standards Committee of the Ministry of Agriculture, Fisheries and Food issued a report on Sausages in which it recommended substantially the reinstatement of the standards which were abolished upon the decontrol of sausages in March, 1953. Legal effect has not yet been given to these recommendations and in view of the doubtful legal position it is not surprising that many enforcing authorities are reluctant to institute legal proceedings in respect of the meat content of sausages.

During the year, nine samples of pork sausages and one of beef sausages were analysed, and four of the former contained less than 65 per cent of meat, their meat contents being 48, 55, 57 and 59 per cent. These samples were considered to be of unsatisfactory composition, and the Ministry of Agriculture, Fisheries and Food was informed of these findings through the statutory quarterly analytical reports. The sample of beef sausages was of satisfactory composition with a meat content of 53 per cent.

Sausages are permitted to contain sulphite preservative up to 450 parts per million when expressed in terms of sulphur dioxide, provided its presence is disclosed to the purchaser on a label given with the sausages or by means of a notice in the shop. Two samples contained 190 and 240 parts per million of sulphur dioxide respectively, though its presence was not disclosed, and in both cases the manufacturers were warned by the Chief Public Health Inspector.

Tomato Sauce.—The Food Standards (Tomato Ketchup) Order requires tomato sauce to contain not less than 6 per cent of tomato solids—a very modest proportion, and the Labelling of Food Order requires this product to bear a label setting out the ingredients in the order of the proportion in which they were used in its manufacture, commencing with that used in the greatest proportion.

The labels on informal samples of two different brands of tomato sauce did not bear a list of the ingredients, and one of these samples contained only 3 per cent of tomato solids. The makers of the sample with the labelling irregularity only were cautioned by letter, they attributed the omission to an oversight and promised to rectify it immediately. In the case of the other sample which was also very deficient in tomato solids a formal sample was procured early in 1958 and this also was unsatisfactory as regards both composition and labelling. The manufacturers were interviewed by the Chief Public Health Inspector (Mr. W. Bate) and cautioned. The labelling offence was attributed to the human element, but it was stated that they were quite unaware of the legal standard of composition for this article.

ATMOSPHERIC POLLUTION

> *" Air pollution . . . needs to be combated with the same conviction and energy as were applied one hundred years ago in securing pure water."*
>
> —Report of the Beaver Committee on Air Pollution, 1954

" The Investigation of Atmospheric Pollution " is a scheme in which Local Authorities, Government Departments, industrial organisations and others, co-operate in the study of the pollution of the atmosphere and its prevention. A short account of the development of this scheme was given in the Annual Report for 1955, pp. 93 and 94.

Though the object of the " Investigation of Atmospheric Pollution " is to obtain exact scientific information, its ultimate purpose is to give assistance to public authorities and to industry in dealing with the smoke problem and with public health questions, and to this end a Standing Conference of Co-operating Bodies has been established to which all who are taking part in the work or who are contributing to the research funds are entitled to send representatives. In this way, the closest possible contact is made between the Department, as responsible for the direction of the work, and the representatives of Local Authorities and Industry, as responsible for the practical application of the results. Members of the Atmospheric Pollution Research Committee attend meetings of the Standing Conference, two of which are held annually. Alderman C. A. Bence, M.R.C.S., L.R.C.P., and Dr. W. Powell Phillips, O.B.E., Medical Officer of Health, represent Cardiff on the Standing Conference of Co-operating Bodies.

The Cardiff City Council has co-operated in this scheme since 1926, when a standard Deposit Gauge was fixed in the Priory Gardens, but this site proved to be unsuitable and on the 1st January, 1928, the gauge was removed to the roof of the City Hall where it is still situated. In 1932 a Lead Peroxide " Candle " also was set up at this site for the purpose of measuring sulphur pollution.

The deposit gauge is used to measure the rate at which atmospheric pollution is deposited and, by inference, the rate at which it is emitted into the air. It consists essentially of a glass bowl, 12 inches in diameter, which drains into a bottle of about 10 litres capacity, and after it has been exposed on the site for one calendar month the extent of pollution by deposited matter is determined by analysis of the solid and liquid fractions collected. The full examination of the deposit includes the determination of the volume of liquid (rain) collected, its pH value, and its content of calcium, chloride and sulphate ions and of total dissolved matter; the undissolved matter is weighed and analysed for ash, " tar " (i.e., material soluble in carbon disulphide), and other combustible matter.

The lead peroxide candle serves for the measurement of sulphur gases in the air. One of the most deleterious products of the combustion of fuels is sulphur present in the form of its oxides, mainly sulphur dioxide. Sulphur dioxide is discharged into the atmosphere with the chimney gases wherever fuel in the form of coal, coke, fuel oil or unpurified gases is burnt. A relatively small proportion of the sulphur contained in solid fuels is retained in the ashes, but the bulk of it goes into the atmosphere. It was estimated by the Beaver Committee on Air Pollution that in Great Britain in the year 1953, no less than 5·2 million tons of sulphur dioxide were discharged into the atmosphere from the consumption of coal, coke and oil.

In the lead peroxide method of measuring sulphur dioxide, a small porcelain cylinder or " candle " coated with lead peroxide is exposed to the air for one month and then analysed for sulphates, since the sulphur dioxide taken up from the air is oxidised by the lead peroxide to sulphate. To protect the candle from rain and external damage during exposure it is housed in a louvered box. The results are expressed in empirical units, viz., milligrams of sulphur trioxide per day per 100 square centimetres of standard lead peroxide exposed in the standard apparatus; they thus provide comparative data only, but they do afford a means of comparing the intensity of pollution of the air by sulphur gases at different places and times and they give a useful indication of the relative effects of polluted atmosphere upon buildings, stonework, metals and paints. It should be noted that even if visible smoke and grit emission from chimneys are prohibited and smokeless zones become more common, sulphur gases will still be released into the atmosphere wherever coal, smokeless solid fuel or oil is burned, and it is these invisible gases which cause such damage to man, property and vegetation.

The results obtained at the City Hall site are forwarded by the Health Department each month to the Superintendent of Observations at the Fuel Research Station, London, and they form part of the nation-wide survey made by the Department of Scientific and Industrial Research. Long-term records are particularly useful, and observations made at an approved site should be continued for they provide valuable information as to changes in pollution in relation to industrial and other developments in the area. In addition, whether the site is in a clean or a heavily polluted area, the results are invaluable to medical and other investigators studying the effects of pollution.

Cardiff Observations for 1957.—The results of the monthly analyses covering the year under review are given in the table overleaf.

ROOF OF CITY HALL, CARDIFF. MONTHLY RESULTS, 1957

Deposited Matter—tons per square mile

Type of Deposit	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Total Undissolved Matter ..	20·41	10·07	9·68	4·36	8·15	5·56	5·37	6·37	6·34	6·76	5·29	13·33
"Tar"	0·73	0·10	0·34	0·32	0·22	0·10	0·37	0·10	0·19	0·10	0·23	0·14
Other combustible matter	11·14	2·77	2·07	1·12	2·15	1·87	2·05	1·98	1·78	2·40	2·11	3·89
Ash	8·54	7·20	7·27	2·92	5·78	3·59	2·95	4·29	4·37	4·26	2·95	9·30
Total Dissolved Matter ..	15·85	6·56	6·42	1·54	2·90	2·59	4·54	5·46	9·15	7·49	4·54	10·61
Calcium, Ca^{++} ..	1·73	0·80	0·71	0·20	0·41	0·42	0·51	0·56	0·61	0·63	0·39	0·93
Chlorides, Cl'	2·00	1·12	1·98	0·24	0·47	0·17	0·86	1·29	1·05	1·85	0·97	2·76
Sulphates, SO_4 ..	2·97	1·56	2·03	0·22	0·78	1·00	1·59	1·47	1·75	1·92	1·34	2·61
Total Solid Matter Deposited	36·26	16·63	16·10	5·90	11·05	8·15	9·91	11·83	15·49	14·25	9·83	23·94
Rainfall, in inches ..	4·37	4·38	4·61	0·12	1·50	1·22	5·36	3·31	5·28	3·90	2·60	2·10
pH value of filtrate from gauge	6·1	6·4	6·2	5·4	6·2	5·9	5·5	6·5	6·5	6·5	5·1	5·1
Sulphur Dioxide expressed as milligrams SO_3 per 100 sq. cms. lead peroxide per day	1·15	1·11	0·82	0·76	0·58	0·39	0·40	0·36	0·58	0·78	1·16	1·48

Deposited Matter.—It will be observed from this table that widely differing quantities are often collected in the deposit gauge in successive months. This is due to the fact that the rate of deposition of pollution in any one specified locality depends not only on the fuel consumed in that locality but also on rainfall, the strength and direction of the wind and other variable meteorological factors. Hence, only a small part of the differences is due to variations in the rate at which pollution is emitted. On an average over a long time, however, rainfall, wind and other meteorological variables are approximately the same, so that changes in the emission of atmospheric pollution can be detected. Experience has shown that reliable conclusions can be drawn from the data gathered at the same test-site over periods of five years, and for this reason it is the practice of the Fuel Research Station to issue periodically reports in which comparison is made of these five-yearly averages. In this way changes in the amount of atmospheric contamination can be determined and their significance can be statistically assessed. Trends in pollution are thus ascertained.

The next table shows the annual rate of deposition of the various pollutants in the neighbourhood of the City Hall, together with the monthly averages for the summer months (April – September), for the winter months (January – March, and October – December) and for the whole year. For comparison, the annual rate of deposition of the various constituents for the years 1956 and 1955 are also shown.

CITY HALL SITE

Deposited Matter, tons per square mile

Constituent of Deposit	Monthly Rate of Deposition 1957			Total deposit 1957	Total deposit 1956	Total deposit 1955
	For summer months	For winter months	For whole year			
Total Undissolved Matter ..	6·03	10·92	8·47	101·69	96·48	93·03
Tar	0·22	0·27	0·25	2·94	2·74	3·26
Other combustible matter	1·83	4·06	2·94	35·33	31·79	30·22
Ash	3·98	6·59	5·28	63·42	61·95	59·55
Total Dissolved Matter ..	4·36	8·58	6·47	77·65	73·24	70·68
Calcium, Ca^{++} ..	0·45	0·87	0·66	7·90	9·39	7·67
Chlorides, Cl'	0·68	1·78	1·23	14·76	11·50	9·31
Sulphates, SO_4'' ..	1·14	2·07	1·60	19·24	23·06	20·50
Total Solid Matter Deposited ..	10·39	19·50	14·94	179·34	169·72	163·71
Rainfall, in inches	2·80	3·66	3·23	38·75	35·83	32·67
pH value of filtrate from gauge :						
Maximum	6·5	6·5	6·5	6·5	6·9	6·3
Minimum	5·4	5·1	5·1	5·1	5·7	4·5
Average	6·0	5·9	6·0	6·0	6·1	5·6

During 1957, solid matter was deposited in the neighbourhood of the City Hall at the rate of 179·3 tons per square mile per annum. This is an increase of 5·6 per cent over the rate of deposition for 1956 which was 169·7 tons per square mile per annum. This increase may not be significant, however, since the deposited matter was particularly high in January, 1957, doubtless the effect of the falls of snow that occurred during this month, and for the rest of the year the average rate of deposition was somewhat less than in 1956. It seems likely, therefore, that the increase in the amount of matter deposited from the atmosphere during 1957 was due mainly to meteorological factors rather than to an increase in the emission of solid pollutants. Pollution was almost twice as great in the winter months as in the summer months, the increase in winter-time being due almost entirely to domestic fires.

It is of interest to compare these figures with high, average and low values obtained at sites maintained by Co-operating Bodies during the year ended 31st March, 1955, and recorded in the Report of the Director of Fuel Research on the Investigation of Atmospheric Pollution for that year.

	High	Average	Low	Cardiff, 1957
Total solid matter deposited in tons per sq. mile per year ..	1,172	226	70	179

The " high " values are arithmetic means for the six sites at which the six greatest deposits for the whole year were observed, the " average " values refer to all the sites (some 700) at which deposit gauges were in operation, and the " low " values are the arithmetic means for the six sites at which the six lowest deposits for the whole year were observed. The pollution of the atmosphere in the neighbourhood of the City Hall is well below the average of all the sites, but as Dr. W. Powell Phillips, Medical Officer of Health for Cardiff, said in his preface to the Annual Report for 1955, it is " of extreme importance to maintain Cardiff's relatively good position in relation to atmospheric pollution." The Cardiff City Council has authorised the provision of additional apparatus so that measurements can be made in other areas of the City.

Sulphur Pollution during 1957.—The results of the measurements of the sulphur gases in the atmosphere by the lead peroxide method are given in the table on page 93. They are further considered in the table below where comparison is also made with previous years, the figures for the five-yearly periods being taken from the Twenty-seventh Report on the Investigation of Atmospheric Pollution published by the D.S.I.R. during 1955.

Sulphur Pollution—City Hall, Cardiff, site

Period	Sulphur dioxide, rate of absorption expressed as milligrams SO_3 per 100 square centimetres lead peroxide per day		
	Summer	Winter	Whole Year
1939–44	0·64	1·28	0·96
1944–49	0·61	1·29	0·95
1949–54	0·57	1·24	0·91
1955	0·61	1·21	0·91
1956	0·56	1·24	0·90
1957	0·51	1·08	0·80

As with the solid pollutants, pollution with sulphur gases was twice as great in the winter months as during the summer, though the average sulphur pollution for the whole year showed a reduction of 11 per cent compared with 1956. The results obtained over the next few years will indicate whether or not this reduction is casual or is due to less emission of sulphur gases.

It should be noted that a clean rural atmosphere will give an average active sulphur pollution figure of approximately 0.25 mgm. SO_3 per 100 sq. cms. per day, while heavily polluted industrial areas give an average figure of 5 or more mgm. SO_3 per 100 sq. cms. per day.

The Extent and Effects of Air Pollution.—The smoke from domestic appliances is estimated at about 1,000,000 tons per annum or about one-half of the total smoke emitted, although the coal consumption for domestic purposes is only about one-sixth of the total coal. Sulphur dioxide emitted into the atmosphere from burning fuels is estimated at 5,500,000 tons per annum, of which about 5,000,000 tons is from coal and 500,000 tons from oil. The grit and dust emitted from the burning of coal amounts to about 1,000,000 tons per annum mainly from industrial undertakings. The increased use of small sized high ash coal has accentuated the problem.

The effects of this pollution can be observed in the blackening of buildings and their deterioration, the corrosion of metalwork, the rotting of leather and fabrics, and the detrimental effects on agriculture. The effects on health are most noticeable in periods of polluted fog, as instanced by the 4,000 additional deaths in London during the " smog " period of December, 1952.

The cost of air pollution in Great Britain has been estimated at £250,000,000 per annum, equivalent to £10 per head of population in the black areas and £5 per head over the whole population. This excludes the loss of £25—50,000,000 from the imperfect combustion of coal.

These figures give some idea of the magnitude—and the worthwhileness—of the task of the Clean Air Council in reviewing the progress made in abating the pollution of the air. This Council was constituted under the Clean Air Act, 1956, and its members include representatives from local government, general industry, scientific research, the fuel and power industries, the railways and shipping. It held its first meeting in July, 1957, under the Chairmanship of the Minister of Housing and Local Government, Mr. Henry Brooke. One of the members is Sir Hugh Beaver, the Chairman of the Committee on Air Pollution on whose Report the Clean Air Act was based. Some of the provisions of the Act, including powers enabling local authorities to establish " smoke control areas," have been in force since the beginning of 1957, and it is the intention of the Government to bring the remaining provisions of the Act into operation on the 1st June, 1958.

MISCELLANEOUS SAMPLES

Sterilised Milk.—The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949, require sterilised milk to be filtered or clarified, homogenised and heated in bottles to a temperature not below 212°F. for such a period as to ensure that it will satisfy a prescribed test designated the Turbidity Test. This test is based upon the fact that heating to not less than 212°F. for a period sufficient for effective sterilisation will also completely denature all the soluble protein of the milk. Samples that show the presence of soluble protein under the conditions of the test are insufficiently heated or contain raw milk.

During the year, 77 samples of sterilised milk were submitted under these Regulations and all of them satisfied the turbidity test.

Imported Foods.—Fifteen samples were examined for the Cardiff Port Health Authority. They comprised the following articles :—

Butter	1	Raisins	1
Cherries, Canned	1	Shrimps, Canned Peeled	3
Maize, Ground	2	Tomato Paste	1
Oranges	4	Walnuts	2

With the exception of one of the samples of ground maize, which was mouldy and unfit for human consumption, these were satisfactory.

Fertilisers and Feeding Stuffs.—Nine samples of fertilisers and twelve of feeding stuffs were submitted under the provisions of the Fertilisers and Feeding Stuffs Act, 1926. This Act requires " Statutory Statements " of composition to be given with fertilisers and feeding stuffs, and Regulations under the Act prescribe limits of variation between these statements and the actual composition of the article.

With one exception the samples agreed, within the limits of variation permitted by the Regulations, with the particulars of composition supplied. These very satisfactory findings undoubtedly are due to two main factors—in the case of feeding stuffs, to the wider and more practical tolerances provided for oil and fibre declarations by the Fertilisers and Feeding Stuffs Regulations that came into operation on the 1st January, 1956, and as regards fertilisers, to their being manufactured mainly by big concerns that can turn out products of more uniform composition and exercise more rigid analytical control.

A sample of bone meal fertiliser was guaranteed to contain 3·5 per cent of nitrogen and 16·0 per cent of phosphoric acid, P_2O_5. Analysis showed that this material did in fact contain 4·6 per cent of nitrogen and 15·8 per cent of phosphoric acid. The Regulations allow variations from the figures guaranteed of 0·5 per cent for nitrogen and 1·0 per cent for phosphoric acid. The declaration of phosphoric acid was correct within the limits of variation permitted by the Regulations, but the excess of nitrogen amounted to 1·1 per cent. Though this was outside the limit of variation allowed, it was not to the prejudice of the purchaser.

The Fourth Schedule to the Act defines " Bone Meal " as " commercially pure bone, raw or degreased, which has been ground or crushed, and which contains not less than 3·5 per cent nitrogen and not less than 20 per cent phosphoric acid." Bone meal that contains less nitrogen or less phosphoric acid must be described as Bone Meal, Grade II. The sample was not so described and the vendor's suppliers were found to be responsible for the omission of the words " Grade II " and they stated they would take steps to prevent a recurrence of this offence which was due to a clerical oversight.

Public Health Department.—In addition to the 36 extensive analyses in connection with atmospheric pollution, 276 samples comprising the following articles were examined for the Public Health Department :—

Swimming bath waters ..	207	Pickling brine	6
Other water samples ..	31	Dust and Grit	5
Human Milk	17	Rat baits	5
Prepared foods	5		

The examination of samples from the swimming baths in the City provides information for the maintenance of safe and attractive water in the baths, with freedom from deleterious effects upon the eyes and skin of the bathers.

The other water samples examined for this Department were from wells, cellars and basements, Llanrumney pond and stream and Roath Park Lake.

One of the 17 samples submitted as Human Milk by the Human Milk Bureau at St. David's Hospital (by arrangement with the Public Health Department) proved to be cows' milk.

In addition to the analytical work carried out for the Public Health Department, a thick syrup poison bait containing thallium sulphate was made up periodically for the destruction of household ants. Experience with this bait over a number of years has shown that it is most successful, and many long-established colonies have been completely wiped out.

Solutions were also prepared regularly for use in the control of the break-point chlorination process at the Guildford Crescent swimming baths.

City Surveyor's Department.—Three samples of mortar, and a water from the basement of a house were analysed for this Department. The samples of mortar were in accordance with the specification. The Laboratory has also been consulted on several occasions in connection with the disposal of trade effluents.

Waterworks Department.—Three hundred and twelve samples of water and three of other articles were examined for the Waterworks Department. This is a big increase compared with 1956 when 119 samples of water and 6 of other articles were examined for this Department, and this is due largely to the laboratory undertaking from 1st April, 1957 the analysis of the regular samples taken in connection with the treatment and distribution of the piped supply which up to this time had been carried out in the laboratory of Glamorgan County Council. In addition to this, the work has included the regular examination of samples from the Sor Brook and River Usk taken in connection with the Llandegfedd reservoir scheme, the analysis of samples of other potential sources of supply, samples taken to ascertain whether there was leakage from the mains and the investigation of consumers' complaints. The other articles were a sludge from the clear water well at Llwyn-on and substances removed from two water meters.

Other Samples.—The following are particulars of 22 samples from other sources that were examined during the year :—Foods (4), Water (14), Effluents (2), Health Salts and Rock.

One of the samples of food was milk, contained in a silver-plated jug, which had been served with coffee. The milk was found to be contaminated with a synthetic detergent. Fortunately it made the coffee taste so nasty that very little was swallowed and no serious effects were reported.

XI—METEOROLOGICAL OBSERVATIONS

1957

The geographical position of the Meteorological Station, which is situated at Penylan, Cardiff, is Latitude 51° 30′ N., Longitude 3° 10′ W., and the height of the Station above mean sea level is 203 feet. Observations were made daily at 9.0 a.m. Summaries of the observations made during 1957 are given in the following tables :—

Barometric Pressure and Relative Humidity

Month	Attached Thermometer (Mean)	Mean Barometric Pressure		Hygrometer		
		Uncorrected	Reduced to Mean Sea Level and Temp. 32° F.	Dry Bulb (Mean)	Wet Bulb (Mean)	Mean Relative Humidity
	°F.	Inches	Inches	°F.	°F.	%
January ..	42·6	29·900	30·109	42·0	40·5	87
February ..	43·3	29·506	29·712	40·6	39·6	91
March ..	48·5	29·685	29·875	47·8	46·4	89
April ..	49·2	30·046	30·235	49·4	45·4	71
May ..	52·1	29·873	30·050	53·3	48·4	68
June ..	59·7	29·607	29·757	62·2	54·9	60
July ..	61·7	29·790	29·934	63·7	58·5	72
August ..	60·4	29·763	29·913	61·5	57·3	77
September	56·2	29·764	29·927	55·9	53·1	82
October ..	52·8	29·553	29·727	52·2	50·6	82
November ..	45·2	29·894	30·096	42·8	41·1	85
December ..	41·7	29·725	29·935	40·6	39·4	89
	51·1	29·759	29·838	51·0	47·8	80

Temperature

Month	Absolute Maximum	Absolute Minimum	Mean of Maximum	Mean of Minimum	Mean Temperature	Difference from Average (68 years)
	°F.	°F.	°F.	°F.	°F.	°F.
January ..	56	27	47·1	37·1	42·1	+2·1
February ..	54	29	48·4	37·2	42·8	+2·6
March ..	64	33	54·7	43·2	48·9	+5·7
April ..	67	37	57·1	43·0	50·0	+2·9
May ..	71	37	60·5	44·4	52·4	—0·5
June ..	85	43	71·8	51·1	61·4	+3·5
July ..	83	48	69·2	56·3	62·7	+1·9
August ..	80	46	68·0	54·0	61·0	+0.2
September ..	68	38	61·3	50·7	56·0	—0·9
October ..	66	36	58·7	46·7	52·7	+2·0
November ..	55	30	48·0	39·4	43·7	—1·1
December ..	55	25	43·0	36·0	39·5	—1·8
	85	25	57·2	44·8	51·1	+1·4

Underground Temperature and Sunshine

Month	Underground Temperature (Mean)		Bright Sunshine	
	1 ft.	4 ft.	Total Duration	Difference from Average (49 years)
	°F.	°F.	Hours	Hours
January ..	42·1	46·0	37·0	—15·6
February ..	42·9	45·4	89·0	+13·6
March	47·2	46·6	86·9	—35·0
April	50·7	49·6	173·5	+ 4·3
May	54·9	52·1	217·7	+14·3
June	61·9	56·3	301·1	+86·9
July	64·3	59·8	177·6	—20·9
August	64·0	60·7	187·7	+ 1·4
September ..	59·5	59·2	121·9	—21·9
October ..	54·7	56·5	81·4	—23·7
November ..	47·6	52·6	64·9	+ 0·9
December ..	42·3	47·8	54·7	+ 6·7
	52·6	52·7	1,593·4 *	+11·0

*=35·6% of possible duration and a daily average of 4·37 hours

Rainfall

Month	Total	Difference from Average (68 years)	Greatest Fall in 24 hours*		Number of Rain-days (0·01 inch or more)
			Amount	Day	
	Inches	Inches	Inches		
January ..	4·90	+0·83	1·62	31st	21
February ..	5·31	+2·45	0·92	23rd	23
March ..	5·10	+2·28	0·84	9th 16th	19
April ..	0·23	—2·40	0·20	17th	3
May ..	1·73	—1·00	0·55	15th	12
June ..	1·27	—1·3	0·41	9th	8
July ..	5·17	+2·12	0·98	20th	15
August ..	3·49	—0·58	0·69	11th	15
September ..	5·07	+1·70	1·24	10th	19
October ..	4·21	—0·40	0·69	29th	17
November ..	2·74	—1·37	1·12	3rd	8
December ..	2·40	—2·04	0·60	11th	17
	41·62	+0·29	1·62 in. on 31st Jan.		177

*24 hours ended 9.0 a.m. (G.M.T.) next day

PORT HEALTH SERVICE

REPORT FOR 1957 OF Mr. T. G. NEWBY, Chief Port Health Inspector

The Cardiff Port Health Authority was constituted by Provisional Order in 1882, becoming permanently constituted with extended limits of jurisdiction in 1894. The limits of the Port Health District extend from Sully Island to the Rhymney River, the Authority having jurisdiction over all waters, docks, harbours and vessels within the said limits.

The Port Health Authority is invested with all the functions, rights and liabilities of an Urban Sanitary Authority under certain sections of the Public Health Acts, so far as they are applicable to waters, vessels, persons, goods or things on, or landed from, any vessel within the said jurisdiction.

In accordance with the instructions of the Ministry of Health, Sections I, V, VI, VIII, XIV, XV and XVI of the report are not repeated in full.

SECTION I—STAFF

TABLE A

NO CHANGE

SECTION II

AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

The number and tonnage of vessels entering the port (which includes Penarth) inspected by officers of the Port Health Authority during 1957 are set out below :—

TABLE B

Ships from	Number	Tonnage	Number Inspected by the		Number of Ships reported as having, or having had during the voyage, infectious disease on board
			Medical Officer of Health	Port Health Inspector	
Foreign Ports ..	749	1,353,407	80	595	4
Coastwise ..	1,958	858,333	3	740	7
TOTAL ..	2,707	2,211,740	83	1,335	11

The following table shows the number of vessels entering the port which were dealt with by the department each month during 1957 :—

Month	From Foreign Ports	Coastwise	Total
January	53	169	222
February	48	166	214
March	64	152	216
April	63	170	233
May	56	176	232
June	70	178	248
July	82	158	240
August	66	139	205
September ..	68	158	226
October	67	170	237
November ..	60	196	256
December ..	52	126	178
TOTAL ..	749	1,958	2,707

The nationalities of the several types of vessels entering the port which were dealt with by the department during 1957 are shown in the following table :—

Nationality	Steam	Motor	Sailing	Total
Belgian	—	4	—	4
British	909	820	91	1,820
Chilean	1	—	—	1
Costa Rican ..	15	—	—	15
Danish	17	14	—	31
Dutch	2	473	—	475
Finnish	11	1	—	12
French	18	16	—	34
German	10	59	—	69
Greek	11	—	—	11
Indian	3	—	—	3
Irish	—	11	—	11
Italian	2	4	—	6
Liberian	8	5	—	13
Norwegian ..	16	37	—	53
Panamanian ..	22	6	—	28
Russian	3	2	—	5
Spanish	22	4	—	26
Swedish	48	40	—	88
Syrian	1	—	—	1
Turkish	1	—	—	1
TOTAL ..	1,120	1,496	91	2,707

SECTION III

CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

Passenger Traffic
- Number of passengers INWARDS .. 344
- Number of passengers OUTWARDS .. 201

Cargo Traffic
- Principal IMPORTS—Iron ore, timber, pitwood, grain, fruit and provisions.
- Principal EXPORTS—Coal, patent fuel, heavy iron and steel goods, and general merchandise.

Principal Countries from which ships arrive—Brazil, Canada, Finland, France, Germany, Holland, India, Italy, Norway, North and West Africa, Portugal, Russia, Spain, Sweden and the United States of America.

SECTION IV

INLAND BARGE TRAFFIC

Numbers and Tonnage using the District and places served by the Traffic

NONE

SECTION V

WATER SUPPLY

NO CHANGE

Reports and tests for contamination.—During the year 9 samples of drinking water from ships were submitted to the Public Health Laboratory for bacteriological examination, the results being as follows :—

Satisfactory	..	9
Contaminated	..	—
TOTAL	..	9

SECTION VI

PUBLIC HEALTH (SHIPS) REGULATIONS, 1952-1954

NO CHANGE

Cleansing and Disinfestation.—During the year fourteen vessels were found to be infested with cockroaches and three vessels were found to be infested with bed-bugs, and notices were served upon the masters requiring them to take all necessary steps to eradicate the insects, the beds infested with bed-bugs being subsequently destroyed. Ten seamen discovered to be suffering from scabies were treated at the Seamen's Baths belonging to the Cardiff Corporation.

SECTION VII

SMALLPOX

Name of Isolation Hospital to which Smallpox cases are sent from the district.

From Cardiff City Isolation Hospital to Penrhys Hospital, Pentre, Rhondda.

Arrangements for transport of such cases to that hospital by ambulance, giving the name of the Authority responsible for the ambulance and the vaccinal state of the ambulance crews.

Arrangements are made at the City Isolation Hospital, the Cardiff City Council being responsible for the ambulance service.

Ambulance crews are vaccinated.

Names of Smallpox consultants available.

G. Emrys Harries, M.B., B.S., D.P.H.,
Medical Superintendent,
Cardiff City Isolation Hospital.

G. F. J. Thomas, M.R.C.S., L.R.C.P., D.P.H.,
Medical Superintendent,
St. David's Hospital, Cardiff.

Facilities for laboratory diagnosis of smallpox.

Facilities are provided by the Public Health Laboratory Service, Institute of Pathology, Cardiff Royal Infirmary.

SECTION VIII

VENEREAL DISEASE

NO CHANGE

The number of cases of venereal disease dealt with at the special treatment centre for seamen during the year were as follows :—

Persons attending at the Centre for the First Time					
Year	Syphilis	Gonorrhoea	Non-Venereal and Other Conditions	Total	Total Attendances
1957	55	152	215	422	2,184

Eight cases of venereal disease came to the knowledge of officers of the Authority during the year and were recommended for treatment at the centre.

SECTION IX

CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS

The following table shows the number of cases of infectious disease that occurred on vessels which arrived at the port during the year :—

TABLE D

Category	Disease	Number of cases during the year		Number of Ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	Chicken Pox	—	3	2
	Influenza	—	1	1
	Pneumonia	—	1	1
Cases which have occurred on ships from foreign ports but have been disposed of before arrival	Nil	—	—	—
Cases landed from other ships ..	Chicken Pox	—	1	1
	Influenza		26	6

The cases referred to in the foregoing table were dealt with as follows :—The four cases of Chicken Pox and one of Pneumonia were removed to the Cardiff City Isolation Hospital and the twenty-seven cases of Influenza were treated on board.

SECTION X

OBSERVATIONS ON THE OCCURRENCE OF MALARIA IN SHIPS

No cases of malaria were reported to have occurred on vessels which arrived at the port during the year.

SECTION XI

MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED OF PLAGUE

No case, or suspected case, of plague was reported to have occurred on vessels which arrived at the port during the year. Vessels arriving from plague-infected or suspected areas are visited on arrival, or as soon afterwards as possible, by the Port Medical Officer and Port Health Inspector on rota duty. All vessels arriving from these areas are

thoroughly searched for rat evidence by the Authority's rodent operative, trapping is carried out and any rats caught or found dead are submitted to the Public Health Laboratory for bacteriological examination.

MEASURES OF RAT DESTRUCTION ON VESSELS FROM PLAGUE "INFECTED" OR "SUSPECTED" AREAS

Total number of such vessels arriving	Number of such vessels fumigated by HCN	Number of rats killed	Number of such vessels on which trapping, poisoning, etc. were employed	Number of rats killed	Number of such vessels on which measures of rat destruction were not carried out
66	—	—	35	—	31

SECTION XII

MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS

Procedure for inspection of ships for rats.

Certificates of deratting or deratting exemption are checked for validity and enquiries made to members of crews as to whether rats have been seen or are known to be on board. Trapping is carried out on vessels where rat indications are found and, as a precautionary measure, instructions are given to place rat guards on mooring ropes. Masters of vessels producing invalid certificates, and on which vessels the rat population cannot be classed as negative, are instructed to have the vessels fumigated.

Arrangements for the bacteriological or pathological examination of rodents, with special reference to rodent plague, including the number of rodents sent for examination during the year.

A proportion of all rats trapped or found after fumigation is submitted to the Public Health Laboratory for examination for the detection of plague. One rat was destroyed by fumigation and was submitted for examination for the detection of plague, which proved to be negative. Two vessels were deratted by sodium fluoroacetate and, as a result, nine rats were found dead. No rats were caught by traps.

Arrangements in the district for deratting ships, the methods used, and, if done by a commercial contractor, the name of the contractor.

Arrangements for the deratting of ships by hydrogen cyanide have been carried out in strict accordance with the Hydrogen Cyanide (Fumigation of Ships) Regulations, 1951, which became operative on the 1st February, 1952. During the year, 2 vessels were fumigated by hydrogen cyanide for the issue of deratting certificates. Whenever deratting of a vessel is arranged, the department is notified in advance by the contractor, and an officer of the Port Health Authority attends during the operation. Deratting is carried out by private contractors, the undermentioned operate in the district :—

The Associated Fumigators Limited, London
The Fumigation Services Ltd., Barking, Essex
Scientex Limited, Cardiff
Messrs. David Thomas and Son Ltd., Cardiff
The Western Scaling and Painting Co., Cardiff.

Progress in the rat-proofing of ships

The application and incorporation of rat-proofing principles now observed in modern ship construction is having the desired effect of reducing rodent infestation to a minimum, and it is evident that, in providing these preventive measures, much thought has been given to this question by owners and ship builders.

TABLE E

RODENTS DESTROYED DURING THE YEAR IN SHIPS FROM FOREIGN PORTS

Category	Number
Black rats ..	10
Brown rats	—
Species not known	—
Sent for examination ..	1
Infected with plague ..	—

TABLE F

DERATTING CERTIFICATES AND DERATTING EXEMPTION CERTIFICATES ISSUED DURING THE YEAR FOR SHIPS FROM FOREIGN PORTS

Number of Deratting Certificates issued					Number of Deratting Exemption Certificates issued	Total Certificates issued
After fumigation with		After trapping	After poisoning	Total		
HCN	Other fumigant (state method)					
1	2	3	4	5	6	7
2	—	—	—	2	135	137

The fees received by the Port Health Authority in respect of these certificates amounted to £422 4s. 0d.

The following table shows the numbers of deratting and deratting exemption certificates issued in each of the past ten years :—

Year	Deratting Certificates		Deratting Exemption Certificates		Total
	Number	Percentage	Number	Percentage	
1948	38	20	150	80	188
1949	35	22	121	78	156
1950	20	15	113	85	133
1951	15	11	123	89	138
1952	12	8	138	92	150
1953	3	3	116	97	119
1954	7	6	119	94	126
1955	5	4	119	96	124
1956	3	2	120	98	123
1957	2	2	135	98	137

The number of vessels deratted, the total number of dead rats found after deratting, and the average number of dead rats found per vessel during each of the years 1948–1957 are set out below :—

Year	Number of Vessels Deratted	Total Number of rats found dead after Deratting	Average Number of dead rats found per Vessel
1948	38	339	8·92
1949	35	261	7·46
1950	20	75	3·75
1951	15	174	11·60
1952	12	63	5·25
1953	3	7	2·33
1954	7	50	7·14
1955	5	46	9·20
1956	3	35	11·67
1957	*4	10	2·50

* Deratting Certificates were not issued in respect of two vessels deratted by sodium fluoroacetate.

SECTION XIII

INSPECTION OF SHIPS FOR NUISANCES

TABLE G

INSPECTIONS AND NOTICES

Category of nuisance and number of Inspections		Notices served		Result of serving Notices
		Statutory Notices	Other Notices	
Defects of Original Construction	1,335	—	—	—
Structural Defects through Wear and Tear ..		—	86	Ships on which defects were remedied 82
Dirt, Vermin and other Conditions prejudicial to health		—	30	Ships on which nuisances were remedied 29
TOTAL ..	1,335	—	116	111

The number of re-visits made to vessels in connection with health survey and the remedy of sanitary defects and nuisances totalled 3,591.

Defects and nuisances dealt with during 1957 were as follows :—

Defective ventilators	16
,, skylights and deck lights	5
,, steam heaters, stoves, stove-pipes, etc. ..	62
,, sanitary conveniences, flushes, etc.	88
,, side ports, deck-prisms, etc.	30
,, bulkheads	14
,, floors	31
,, doors	15
,, bunks and bedsteads	13
,, food-lockers and refrigerators	14
,, baths, wash-hand basins and waste pipes ..	154
,, hawse pipes	2
,, scuppers	34
Leaking decks	13
Verminous crew quarters	33
Dirty crew quarters	2
,, provision storerooms	2
,, fresh-water tanks	36
Holds infested with weevils	2
Storerooms infested with weevils	5
TOTAL ..	571

Smoke Nuisances.—During the year vessels lying in the docks were kept under observation and where it was found necessary the responsible persons in charge of fires on board were warned to take proper steps to avoid creating a nuisance by the emission of black smoke.

SECTION XIV

PUBLIC HEALTH (SHELL-FISH) REGULATIONS, 1934 AND 1948

NO CHANGE

SECTION XV

MEDICAL INSPECTION OF ALIENS

(Applicable only to Ports approved for the landing of Aliens)

List of Medical Inspectors of Aliens holding Warrants of Appointment.

NO CHANGE

List of other Staff engaged on this work

NO CHANGE

Organisation of work.

NO CHANGE

Accommodation for medical inspection and examination.

NO CHANGE

Nature and amount of aliens traffic.

Passenger traffic at the port is relatively small and casual. Forty-two ships arrived during the year with 78 alien passengers on board and thirty-three of these were subjected to detailed medical examination.

SECTION XVI

MISCELLANEOUS

NO CHANGE

The Dangerous Drugs Regulations, 1953, No. 499, Section 13 (2) (a).—No certificates were issued authorising the masters of foreign ships to purchase dangerous drugs.

Certificates of Health.—During the year one certificate in respect of the health of the port was issued to the master of a foreign ship.

THE PREVENTION OF DAMAGE BY PESTS (APPLICATION TO SHIPPING) ORDER, 1951

The Prevention of Damage by Pests (Application to Shipping) Order, 1951, made under Section 23 of the Prevention of Damage by Pests Act, 1949, applying the provisions of the Act, with appropriate modifications to shipping, has been strictly enforced.

Under the provisions of the above Order, periodical inspection of coastal vessels, etc., is carried out by officers of the department, and 13 Rodent Control Certificates were issued to masters of vessels during the year. The fees received by the Port Health Authority in respect of these certificates amounted to £13 0s. 0d.

Diseases of Animals Acts, etc.—Eighty-nine dogs and 98 cats were brought to the port on vessels. All the vessels were visited regularly during their stay in port to ensure that the requirements were observed.

FOOD INSPECTION

The principal food imports during the year were from Australia and New Zealand and consisted of beef, mutton, pork, lamb, offal, butter, cheese and fresh and dried fruits. From Canada and the United States of America, wheat, flour, cereals, canned meats and fruit were imported, and from European countries, fresh fruits and canned vegetables. In addition to these direct imports, large quantities of foodstuffs, transhipped at other ports in the British Isles arrived by coastwise traffic.

Examination of imported food is carried out by the food inspectors in the dockside warehouses and occasionally on board ship. If the food examined is found to be in good condition, the whole consignment is released for distribution, but if found to be diseased or unsound, the whole consignment is detained until a complete examination is carried out. Diseased and unsound articles of food are disposed of under the supervision of the food inspectors. When necessary, samples of foodstuffs are submitted for examination.

Examination of imported meat is carried out in the transit sheds on the dock sides and in the local cold stores. The glandular examination of mutton and lamb carcases weighing over 42 lb. was continued but very few cases of caseous lymphadenitis were found.

Imported Foodstuffs.—The quantities of various kinds of foodstuffs imported during the year are shown in the following table :—

Description	*Quantity*	*Description*	*Quantity*
Bacon (Bales)	12,884	Fruit Juice, Canned (Boxes)	56
Barley (Tons)	7,222	Fruit Peel (Boxes)	100
Beer, Bottled (Boxes)	5,050	Fruit Preserves (Box)	1
Biscuits (Crates)	3	Fruit Pulp (Casks)	7
Braised Kidneys (Boxes)	50	Fruit Pulp, Canned (Boxes)	500
Butter (Boxes)	638,702	Lard (Boxes)	75,074
Butter (Casks)	101	Lard, Canned (Boxes)	75
Caraway Seed (Bags)	6	Macaroni (Boxes)	9,234
Cauliflower, Canned (Boxes)	50	Maize (Tons)	509
Cauliflower, Pickled (Casks)	125	Margarine (Boxes)	9,351
Cheese (Boxes)	7,419	Meat, Canned (Boxes)	97,750
Cheese (Crates)	44,497	Milk, Canned (Boxes)	2,026
Cheese (Singles)	23	Nuts (Boxes)	2
Cheesespread, Canned (Boxes)	40	Olive Oil, Canned (Boxes)	63
Citric Acid (Kegs)	500	Potatoes (Baskets)	23,000
Cockles, Salted (Baskets)	63	Potatoes (Bags)	12,713
Cocoa Butter (Bags)	153	Rice (Bags)	2,230
Cocoa Powder (Bags)	748	Salami (Boxes)	196
Cocoa Presscake (Bags)	276	Sauerkraut, Canned (Boxes)	20
Cornflower (Bags)	1,464	Shrimps, Canned (Boxes)	225
Dried Apple Pomace (Bags)	8,000	Soya Bean Flour (Bags)	4,000
Edible Fat (Boxes)	280	Spaghetti, Canned (Boxes)	5
Egg, Frozen, Canned (Boxes)	4,000	Tomato Concentrates, Canned (Boxes)	4,464
Egg, White (Tins)	250	Tomato Juice, Canned (Boxes)	1,230
Farina (Bags)	110	Tomato Paste, Canned (Boxes)	1,142
Farinoca (Bags)	150	Tomato Purée, Canned (Boxes)	1,076
Filberts (Bags)	100	Vegetables, Canned (Boxes)	203,775
Fish, Canned (Boxes)	5,664	Vegetables, Dried (Bags)	11,515
Flour (Bags)	36,211	Vegetables, Fresh (Bags)	37,062
Flour (Tons)	200	Vegetables, Fresh (Boxes)	53,352
Fruit, Canned (Boxes)	31,509	Vegetables, Fresh (Trays)	132
Fruit, Dried (Boxes)	9,704	Vegetables, Pickled (Casks)	194
Fruit, Dried (Bags)	200	Walnuts (Bags)	2,020
Fruit, Dried (Bundles)	349	Walnuts, Pickled (Casks)	6
Fruit, Fresh (Boxes)	138,741	Wheat (Tons)	70,221
Fruit, Fresh (Trays)	780	White Wine, Bottled (Cases)	50
Fruit, Fresh (Barrels)	11,576		

Oversea Meat.—In addition to the foodstuffs already referred to, seven vessels arrived with the following quantities of oversea meat :—

Description	*Quantity*	*Description*	*Quantity*
Carcases of Lamb	227,231	Sides of pork	8
Carcases of mutton	16,211	Boneless meat (Bags)	432
Carcases of lamb and mutton	9,427	Boneless meat (Cartons)	331
Carcases of ewe	1,957	Hearts (Bags)	15
Quarters of beef	5,047	Ox tongues (Bags)	66
Hinds of beef	7,575	Ox livers (Bags)	25
Crops of beef	12,519	Offal (Cartons)	433
Beef ribs and Ponies	1,586	Sweetbreads (Bags)	7
Quarters of veal	206	Sundries (Packages)	2,093
Beef skirts (Bags)	18	Sundries (Bags)	64
Beef livers (Bags)	29		

The quantities of various kinds of foodstuffs withheld from human consumption during the year are shown below :—

	Tons	cwts.	lb.
Bacon	—	2	97
Barley	2	5	7
Beef Brains	—	—	25
Beef Hearts	—	—	6
Biscuits	—	2	18
Butter	—	3	39½
Calavanches	—	1	94
Candied Peel	—	—	30
Cereals	1	11	54¼
Cereals, Canned	—	1	108
Cheese	—	—	53
Cheesespread, Canned	—	—	8
Coffee	—	1	90
Coffee, Canned	—	—	63
Cornstarch	—	3	54
Curry Powder	—	—	10
Eggs	—	—	25
Fish, Canned	—	—	40½
Fish, Frozen	—	2	82
Flour	9	2	64
Fruit, Canned	1	6	87¼
Fruit, Dried	—	10	29
Fruit, Fresh	11	2	86½
Fruit Pulp, Canned	—	—	20
Jelies	—	4	2
Lalrd	—	3	39½
Lard, Canned	—	—	4½
Lime Juice (Bottles)	—	—	15
Macaroni	—	1	42
Maize Flour	—	1	72
Margarine	—	—	106
Marmalade, Canned	—	—	62
Meat, Canned	1	4	94½
Meat, Frozen	2	9	78
Milk, Canned	—	14	27
Oats, Rolled	—	—	84½
Offal	—	1	53
Ox Livers	—	—	80
Potatoes	8	5	0
Rice	1	7	58
Salami	—	1	53
Salt	—	1	0
Sausages	—	—	62
Sausage, Canned	—	—	12½
Semolina	—	—	10
Soup, Canned	—	—	12
Spaghetti	—	—	20
Stew, Canned	—	—	6
Sugar	—	9	88
Sweets	—	1	26

Tapioca	—	10	0
Tomato, Concentrates, Canned	—	—	20
Tomato Paste, Canned ..	—	—	66½
Tomato Purée, Canned ..	—	—	26
Vegetables, Canned ..	—	12	75¼
Vegetables, Dried	—	15	9
Vegetables, Fresh	5	11	44
Vegetables, Pickled ..	—	1	104¼
Vermicelli	—	—	48
Wheat	1	18	0
Yeast	—	—	30
TOTAL ..	52	3	33½

The Public Health (Imported Food) Regulations, 1937-1948, the Public Health (Preservatives, etc., in Food) Regulations, 1925-1948, and the Food and Drugs Act, 1938 (Section 39).—Fifteen samples of imported food were submitted to the Public Analyst for analysis. The nature, country of origin, and the number of samples are shown in the following table :—

Description	Country of Origin	Number of Samples
Butter	Holland	1
Cherries, Canned	Italy	1
Oranges	Palestine	3
Oranges	Spain	1
Peeled Shrimps, Canned	Norway	3
Polenta (Maize Flour)	Italy	2
Raisins	Spain	1
Tomato Paste, Canned	Italy	1
Walnuts	Italy	2

Fourteen of the samples were reported to be genuine or to contain preservatives within the limits prescribed in the Public Health (Preservatives, etc., in Food) Regulations, one sample of Polenta (Maize Flour) was reported to be unsound and 92 x 2 lb. packets were destroyed.

Bacteriological Examinations.—Sixteen samples of imported food were submitted to the Public Health Laboratory Service for bacteriological examination as follows :—

Description	Country of Origin	Number of Samples
Chopped Pork, Canned	Yugoslavia	7
Ham, Canned	Holland	1
Luncheon Meat, Canned	Holland	3
Lunch Tongue, Canned	Holland	4
Ox Liver	New Zealand	1

Fourteen of the samples were reported to be satisfactory, the sample of canned ham was reported to be unsound and the consignment was destroyed, also one tin of chopped pork proved to be unsound and was destroyed.

The Public Health (Imported Milk) Regulations, 1926.—No fresh milk was imported during the year.

CITY OF CARDIFF EDUCATION COMMITTEE

SCHOOL HEALTH SERVICE

1957

I—STAFF

Principal School Medical Officer

W. Powell Phillips, O.B.E., M.R.C.S., L.R.C.P., D.P.H.

Deputy Principal School Medical Officer

Cecil W. Anderson, M.B., CH.B., D.P.H., T.D.D.

Senior Medical Officers

Nancy K. Gibbs, M.R.C.S., L.R.C.P., D.P.H.
Arlwyn H. Griffith, M.B., B.S., D.P.H.

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Anne Guy, B.Sc., M.B., B.CH., D.P.H., D.C.H.
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School Medical Officers (Part-time)

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Margaret Parry, M.R.C.S., L.R.C.P.
Olwen J. Cummin, M.B., CH.B.
Douglas Harrett, M.B., B.CH.
Geoffrey Ireland, M.B., B.CH.
John T. Jones, M.B., B.CH.
Frances Marie Richards, B.Sc., M.B., B.CH., D.R.C.O.G., D.C.H.
(Joint appointment with Welsh National School of Medicine 1.9.55)

N.B.—All school medical officers undertake duties for the Local Health Authority and the Education Committee. The time devoted by them to the School Health Service is equivalent to six and a half whole-time medical officers.

Visiting Specialist Medical Officers

(Under arrangements made with the Welsh Regional Hospital Board)

Rupert Parry, M.D., B.S., F.R.C.S., Ophthalmic Surgeon
Hector A. Thomas, F.R.C.S., Aural Surgeon
Professor A. G. Watkins, M.D., F.R.C.P., Professor of Child Health

School Dental Service

Principal School Dental Officer.—Vacant.

School Dental Officers

D. W. Elliot, L.D.S.
C. N. Howitt, L.D.S.
J. W. Lewis, L.D.S.
H. V. Newcombe, L.D.S.
J. McFarlane, L.D.S., L.R.C.P. & S., F.D.S. (HON.)
D. J. Andrews, L.D.S.
A. Jeffries (half-time)
T. Bassett-James, L.D.S. (part-time)
Miss E. M. Merrifield (half-time)
D. J. Harries, M.A., B.D.S. (part-time).

(All dental officers also undertake services for expectant and nursing mothers and young children. The time devoted to the School Dental Service is equivalent to 6·5 whole-time dental officers).

Consultant Orthodontists

George F. Kennedy, D.ORTH.R.C.S., B.D.S. (January, 1957–September, 1957).
Anthony S. Lewis, B.D.S. (commenced September, 1957).

Nine Dental Clerk/Attendants

(Time devoted to School Dental Service is equivalent to 6·6 dental clerk/attendants)

Nursing Staff

Superintendent Health Visitor.—Miss N. M. Osmond.
(One-third time devoted to School Health Service)

Deputy Superintendent Health Visitor.—Miss M. J. Price.
(One-sixth time devoted to School Health Service)

Fifty-two Health Visitors.—Time devoted to School Nursing duties equivalent to $12\frac{1}{2}$ nurses.

Two State Registered Nurses.—(One for duty at Spastic Unit)

Four Clinic Helpers.—Time devoted to School Health Service is equivalent to 2 clinic helpers.

Speech Therapy

Head Speech Therapist.—Miss B. M. R. Morris, L.C.S.T.

Speech Therapists.—Mrs. Margaret I. Grenville (part-time), Mrs. T. G. Meade, (part-time), Miss Cynthia Lewis (commenced 28th January, 1957), Miss C. Jennifer Simons (commenced 2nd September, 1957), Miss C. Joan Shepherd (Spastic Unit) (2nd September, 1957–23rd December, 1957).

Orthoptic Clinic

Orthoptists.—Miss Joyce Pinnick, Central Clinic.
Miss J. McClement, Canton Clinic.

(85% of time of Clinic is devoted to schoolchildren).

Physiotherapist.—Miss M. G. Jones, M.C.S.P. (commenced duty at Spastic Unit May, 1957).

Child Guidance Clinic

Psychiatrist.—Dr. Gaynor Lacey, M.B., B.S., D.P.M.

Psychologist.—Robert Robertson, M.A., B.ED.

Psychiatric Social Worker.—Miss Frances Meredith.

Secretary.—Miss C. J. Sergeant.

Peripatetic Teacher of the Deaf

Mrs. M. E. Aanensen, B.A.

Administration

Principal Administrative Assistant.—A. E. Brain (Part-time)

Administrative Officer.—P. H. Williams (Part-time)

Administrative Assistant.—A. K. Jenkins (Full-time)

Clerical Assistants.—15.

II—MEDICAL INSPECTION

The average numbers of schoolchildren and the average attendance for the year ended March, 1957, were as follows :—

	Average Number on Registers	Average Attendance
Grammar Schools	5,207	4,937
Secondary Modern Schools ..	7,328	6,600
Other Secondary Schools ..	414	395
Primary and All Age Schools ..	28,446	25,546
Special Schools	306	257
Severn Road Nursery School ..	100	82
TOTAL ..	41,801	37,817

The numbers of schoolchildren inspected at periodic medical inspections at schools during 1957 were as follows :—

Group	Boys	Girls	Total
Prescribed Groups :—			
First Age Group (within 12 months of admission) ..	1,828	1,671	3,499
Second Age Group (at 10 plus years)	1,740	1,622	3,362
Third Age Group (at 14 plus years—Secondary Schools)	1,297	1,026	2,323
Third Age Group (at 15 plus years—Grammar Schools)	501	386	887
Total ..	5,366	4,705	10,071
Other Periodic Groups :—			
Entrants to Grammar Schools	139	77	216
Special Schools	167	156	323
Total ..	306	233	539
Grand Total	5,672	4,938	10,610

The number of schoolchildren specially inspected and the number of re-inspections undertaken were as follows :—

		Boys	Girls	Total
Special Inspections	At School	94	50	144
	At School Clinic	1,455	1,497	2,952
	Total ..	1,549	1,547	3,096
Re-inspections	At School	632	466	1,098
	At School Clinic	789	804	1,593
	Total ..	1,421	1,270	2,691

III—FINDINGS OF MEDICAL INSPECTION

The following table shows the number of individual children found at periodic medical inspection to require treatment (excluding defects of nutrition, uncleanliness and dental disease) :—

	Found to require treatment for			
	Defective Vision	Other Conditions	Total Individual Pupils	Percentage
Prescribed Groups :—				
First Age Group	65	558	608	17·4
Second Age Group	239	330	545	16·2
Third Age Group—Secondary Schools ..	151	149	293	12·6
Grammar Schools ..	57	43	93	10·5
Total ..	512	1,080	1,539	15·3
Other Periodic Inspections :—				
Entrants to Grammar Schools ..	13	15	28	13·0
Special Schools	11	21	31	9·6
Total ..	24	36	59	10·9
Grand Total	536	1,116	1,598	15·0

The percentages of children found to require treatment showed a decrease in many age-groups. Defective vision, squint and other eye defects formed a third of the total defects requiring treatment.

The defects found by the medical inspection of 10,610 children at the periodic medical inspections were as follows :—

Code No.	Disease or Defect	PERIODIC INSPECTIONS					
		Entrants		Leavers		Total —All Groups	
		Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
4	Skin :—						
	Ringworm—Scalp ..	—	—	—	—	—	—
	Body ..	—	—	—	—	—	—
	Scabies	—	—	—	—	—	—
	Impetigo	—	—	—	—	—	—
	Other	34	73	31	26	106	169
5	Eyes :—						
	Vision	65	234	208	104	536	615
	Squint	30	57	7	3	48	98
	Other	11	19	6	6	29	35
6	Ears :—						
	Hearing	21	50	15	17	55	99
	Otitis Media	35	48	15	14	78	109
	Other	12	11	5	2	28	31
7	Nose or Throat ..	157	327	25	32	244	481
8	Speech	39	72	2	10	58	105
9	Cervical Glands ..	43	186	—	22	53	286
10	Heart & Circulation ..	6	47	4	19	15	119
11	Lungs	47	140	4	30	69	278
12	Developmental :—						
	Hernia	5	19	3	—	11	29
	Other	11	92	5	12	37	211
13	Orthopaedic :—						
	Posture	12	37	9	36	34	157
	Flat Foot	71	146	19	49	130	344
	Other	61	188	40	64	159	400
14	Nervous System :—						
	Epilepsy	1	8	—	4	1	23
	Other	8	14	1	4	15	34
15	Psychological :—						
	Development ..	3	18	1	4	7	41
	Stability	9	28	2	5	18	57
16	Abdomen	8	11	—	1	14	17
17	Other Defects & Diseases	39	18	14	6	76	40

The defects found by the medical inspection of 3,096 children at special inspections and re-inspections were as follows :—

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Requiring Treatment (3)	Requiring Observation (4)
4	Skin :—		
	Ringworm—Scalp ..	3	—
	Body ..	2	—
	Scabies	—	—
	Impetigo	10	—
	Other	162	8
5	Eyes :—		
	(*a*) Vision	83	36
	(*b*) Squint	6	4
	(*c*) Other	12	8
6	Ears :—		
	(*a*) Hearing ..	5	4
	(*b*) Otitis Media ..	7	4
	(*c*) Other	7	10
7	Nose and Throat ..	227	112
8	Speech	30	9
9	Lymphatic Glands ..	12	34
10	Heart	3	28
11	Lungs	8	54
12	Developmental :—		
	(*a*) Hernia ..	2	7
	(*b*) Other	5	31
13	Orthopaedic :—		
	(*a*) Posture ..	6	20
	(*b*) Feet	49	40
	(*c*) Other	80	57
14	Nervous System :—		
	(*a*) Epilepsy ..	2	1
	(*b*) Other	76	9
15	Psychological :—		
	(*a*) Development ..	3	13
	(*b*) Stability ..	7	8
16	Abdomen	7	4
17	Other	273	331

Physical Condition.—The following is a classification of the general condition of children medically inspected :—

Age Groups	Number of Children Inspected	Satisfactory		Unsatisfactory	
		Number	Per-centage	Number	Per-centage
Prescribed Groups :—					
First Age Group	3,499	3,431	98·1	68	1·9
Second Age Group	3,362	3,324	98·9	38	1·1
Third Age Group—Secondary Schools	2,323	2,312	99·5	11	0·5
Grammar Schools	887	884	99·7	3	0·3
Total	10,071	9,951	98·8	120	1·2
Other Periodic Groups :—					
Entrants to Grammar Schools ..	216	213	98·6	3	1·4
Special Schools	323	286	88·5	37	11·5
Total	539	499	92·6	40	7·4
Grand Total ..	10,610	10,450	98·5	160	1·5

IV—" FOLLOWING-UP " AND THE WORK OF HEALTH VISITORS

A summary of the work of the health visitors in connection with domiciliary visitation is given in the following table :—

Visits re	Total
Defects of vision	913
Defects of teeth	173
Defects of ear, nose and throat	343
Other defects and diseases ..	1,220
Scabies	13
Nursery School Pupils ..	314
TOTAL ..	2,976

The following is a summary of work done by the visitors in connection with uncleanliness during the year :—

Number of :—

Special visits to schools	764
Examinations of children for uncleanliness	103,097
Children found with vermin and/or nits	2,981
Children found to be free from vermin and nits on re-examination	1,521
Children for whom cleansing notices issued	2,685
Children for whom cleansing orders issued	161

Health Visitors paid 1,148 routine and special visits to schools to inspect and follow up children reported to require treatment.

Health Visitors Survey of the Intermediate Group.—In addition to periodic medical inspection, pupils in primary schools are inspected at the age of eight years by Health Visitors. The number of pupils inspected and re-inspected by Nurses during the year was 1,330 (682 boys and 648 girls) 168 of these children were found to have defects requiring treatment, and 38 pupils were reported to be infested and 32 were bodily unclean.

The physical condition of the pupils inspected was classified as follows :—

	Number	*Percentage*
Satisfactory ..	1,268	98·8
Unsatisfactory ..	16	1·2

Silver Jubilee Camp School, Porthcawl.—Each child is inspected by a Health Visitor before travelling to the Camp, mainly to reduce the risk of infection and the spread of verminous conditions, but also to prevent any child attending who may have become unfit since selection. 52 visits were paid to schools during the year to undertake such inspections.

V—TREATMENT

Particulars of the treatment of minor ailments, defective vision and squint, external eye diseases, defects of ear, nose and throat, of orthopaedic and postural defects, dental defects, etc., are given in the following tables :—

(*a*) *Minor Ailments*

Disease or Defect	Number of Defects treated or under treatment during the year under the Authority's Scheme	Total number of attendances at Clinics
Skin :—		
Ringworm—Scalp	4	
Body	6	
Scabies	51	
Impetigo	96	
Other Skin Diseases	123	
Minor Eye Defects	161	
Minor Ear Defects	98	
Miscellaneous (*e.g.*, minor injuries, bruises, sores, chilblains, etc.)	881	
Total	1,420	6,069

(*b*) *Defective Vision and Squint*

Particulars of the work of the Ophthalmic Clinics during the year are given below :—

Number of children examined	5,275
Errors of Refraction	3,895
† Spectacles prescribed	2,899
Other defects or diseases treated	96
Referred to Orthoptic Clinic	248
Attendances at Clinics	11,077

† There was no change in the prescription in 602 refractions.

Spectacles are supplied through the Supplementary Ophthalmic Service of the National Health Service. The total number of spectacles provided by this Service for school children during the year was 2,872.

Ophthalmic Operations.—Two operations were performed during the year by the Ophthalmic Surgeon and no further cases were on the waiting list at the 31st December. Orthoptic operations are reported in the statistical table for the Orthoptic Clinic.

The Orthoptic Clinic.—The number of patients referred to the Orthoptic Clinics during 1957 was not quite as high as 1956 owing to the fact that a waiting list had accumulated in 1955/56 as there was only one Clinic working. The numbers were then absorbed in 1956. The discharges are about the average. The operation waiting list is being kept down to only a few weeks wait.

Now that the Glamorgan County patients have an Orthoptic Clinic in Ely E.N.T. Hospital, there is no longer a waiting list for Orthoptic treatment at Richmond Road Clinic. There were 55 patients transferred to Ely Hospital and all Glamorgan cases will, in future, be seen there.

In April and May, 1957 a re-examination of older ex-patients who had had operations for squint 8 to 12 years ago, and who were now in their 20's, was carried out at the Orthoptic Clinic, Richmond Road, for a paper which Mr. Rupert Parry read at the 1957 Oxford Ophthalmic Conference. A report on the condition of patients' eyes this length of time after operation had not been done in detail before with full pre and post operative Orthoptic tests.

Forty-seven patients were good enough to come in the evenings for examination. Forty-one of these were found to be as good as when last seen, or better (some cosmetic operations leave patients with a slight residual angle purposely which lessens over the years).

In respect of the other six ex-patients, it was discovered that their results were not being maintained for reasons beyond our control, i.e., either they had refused completion of treatment, not worn their glasses after operation when advised to, or had become short sighted which had increased their convergent angle.

These results were considered to be most satisfactory and it would be interesting to compare them with a similar survey carried out elsewhere.

Statistics relating to the work of the Orthoptist at Central clinic during 1957 are as follows :—

New patients accepted for treatment (including 38 from Glamorgan)	348
Patients discharged—	
With Single Binocular vision (29 without operation)	37
Cosmetically straight (10 without operation) ..	50
Improved (20 without operation)	33
	120
Unsuitable for treatment	5
No improvement	3
No co-operation	10
Refused treatment (occlusion, operation, etc.) ..	5
Failed to attend for treatment	81
Left Cardiff	2
Intractable Amblyopia	4
No need for treatment	3
Referred to Cardiff Royal Infirmary	4
Glamorgan cases transferred to Ely Hospital ..	55
	172
TOTAL DISCHARGED	292
Patients under treatment at end of 1957 :—	
Regular weekly or bi-weekly treatment	45
Having monthly occlusion	128
Under supervision awaiting operation	27
Reporting two to six monthly until old enough for treatment	52
Under supervision between courses of treatment ..	473
TOTAL	725
Operations performed (Llandough Hospital—44) *(Children's E.N.T. Hospital—63)* ..	107
Number on waiting list for operations	27
Number of attendances	5,670

(c) *Defects of Ear, Nose and Throat*

	Ear	Nose and Throat	
		Tonsils and Adenoids	Other Defects
Received Operative Treatment ..	33	1,064	45
Received Treatment in Hospital ..	86	—	
Received other forms of treatment	160	130	
Total number of children examined	388	1,363	
Attendances at Clinics ..	836	2,803	

Waiting list for Operative Treatment at 31st December, 1957

Tonsils and Adenoids—Urgent	..	273	
Ordinary	..	221	
		—	494
Other ear, nose and throat conditions	..	..	16
	Total	..	510

(d) *Orthopaedic and Postural Defects*

Children requiring treatment for Orthopaedic and postural defects are referred to the Orthopaedic Clinic which is now maintained by the Cardiff Hospital Management Committee at specially adapted premises in an annexe to the Children's E.N.T. Hospital at Ely.

Details of the treatment provided were included in previous reports when this Clinic was part of the administriation of the School Health Service. It can be reported, however, that 1,153 pupils were examined and treated at the Clinic during the year.

(e) *Heart Disease and Rheumatism*

The following is a record of the supervisory work carried out during the year at the Rheumatism Clinics :—

Cases remaining under supervision at beginning of year	335
New cases attending	73
Cases discharged from supervision on leaving school ..	84
Other cases who ceased to be supervised :—	
Left Cardiff	5
Died	—
Discharged not suffering from Rheumatism ..	21
Transferred to Private Practitioners and to other clinics	3
Ceased to attend	11
Cases remaining under supervision at end of the year ..	284
Total attendances at routine Rheumatism Clinics ..	576
Routine Clinic Sessions	48
Average attendance at routine clinic sessions	12
Average number of new cases at routine clinic sessions ..	1·5

The following table shows the condition of the heart in the 84 cases that ceased to remain under supervision on leaving school :—

	On Ascertainment	*On Discharge*
Normal	48	57
Minor Heart Manifestations	25	19
Major Heart Manifestations	11	8

The types of heart diseases present in the 8 cases having major heart manifestations on discharge were as follows :—

Mitral Disease (probably incompetence)	3
Mitral and aortic	1
Congenital	4
Congenital-Rheumatism	—
TOTAL	8

One Congenital Heart on Ascertainment had operation for Patent Ductus and was discharged Normal.

One Congenital Heart and Septal Defect on Ascertainment did not have operation, and was Congenital on Discharge.

Treatment of this disease in hospital is still provided at Lord Pontypridd Hospital (Dulwich House) through arrangements with the United Cardiff Hospitals. A close link is maintained with the School Health Service as the Deputy Principal School Medical Officer continues to act as Medical Superintendent and Professor A. G. Watkins of the Department of Child Health holds a Rheumatism Clinic for schoolchildren at the Cardiff Royal Infirmary.

(*f*) *Radiography*

The children referred for radiography were x-rayed at the Orthopaedic Clinic which is now administered by the Cardiff Hospital Management Committee.

(*g*) *Special Clinic for girls at Puberty*

Dr. E. M. Davies has undertaken special clinics for girls sent to her from schools and clinics for advice and treatment on complaints of special significance at this age period.

(*h*) *Cleansing*

(*a*) *Cleansing of children with unclean heads.*—It will be noted that the report of the work of the Health Visitors refers to the cleansing inspections which are undertaken each term in schools. Continual infestation of certain pupils is common in a number of families and it is also noted that certain schools show a considerably higher incidence than others. Every effort is made to ensure that children whose heads are unclean are cleansed at home by the parents. A small proportion for various reasons remain unclean in spite of advice given to parents and such children are sent for cleansing at the Cleansing Station. If this opportunity is not taken by the parents the Authority may proceed against them in the Court under the provisions of the Education Act of 1944. During the year 161 children attended the school clinic or station for such cleansing, but it was not necessary to seek any further powers to secure the cleansing of any child.

(*b*) *Treatment of Scabies.*—Whilst scabies is no longer a problem of the same dimensions as was encountered during the war years, measures are necessary to secure effective treatment of the smaller numbers of persons who become infected. The Department's Cleansing Station, which is staffed as required by clinic helpers, is available for the treatment of adults and children. A summary of the work of the station during the year is as follows :—

Number of cases treated :—	
Schoolchildren	43
Children under school age ..	13
Adults	14
TOTAL ..	70
Attendances for treatment :—	
Schoolchildren	77
Children under school age ..	25
Adults	35
TOTAL ..	137

(*c*) *Miscellaneous.*—110 other persons attended for baths for various reasons.

VI—SCHOOL DENTAL SERVICE

Report for the year 1957 of

Mr. H. V. NEWCOMBE, L.D.S., R.C.S., Principal School Dental Officer

Before reviewing the events of the past year, it is my sad duty to record the death of my predecessor, Mr. W. A. Sutherland, L.D.S., R.C.S., after 29 years of loyal and devoted service. During his term of office as Principal Dental Officer he contributed significantly to the development of the dental side of the Department. Always of a cheerful and amiable disposition he was held in high esteem by his friends and colleagues, by whom he will be greatly missed.

Dental Officers Establishment.—The authorised establishment of nine full-time Officers remains the same as in the previous year. An Orthodontist, who serves the Department in a part-time capacity, is not included in the establishment. A comparison of the Dental Officer strength with that in 1956 is shown in the following tables :—

	As at 31*st December*, 1956	*As at* 31*st December*, 1957
Full-time permanent Officers ..	5	4
Full-time temporary Officers ..	2	2
Half-time temporary Officers ..	2	2
Part-time temporary Officers ..	1	1
	10	9
Strength in terms of full-time Officers ..	8·4/11th	7·6/11th

An offer by the part-time Officer to increase his number of sessions from four to six was accepted and became effective as from June.

Apart from the fall in the effective Dental Officer strength, a disturbing feature, and one to which attention has been drawn in earlier reports, is the high average age of the dental staff. In the case of half-time Officers and in two-thirds of those employed full-time, the average age is above that of the normal retiring age. Due, in large measure, to these adverse circumstances, some decrease in the total number of pupils inspected and treated, as compared with the previous year, was not unexpected. The number of sessions devoted to treatment fell by 4 per cent while the various items of treatment showed a moderate decline in most sections. In the case of conservative work, however, the number of fillings completed fell by only 2·4 per cent, and the number of teeth filled by 3 per cent ; moreover the ratio of fillings : extractions showed an improvement of 8·6 per cent.

Recruitment.—In July, 1958 the National Health Service will have been in existence a matter of ten years and the pension scheme will then come into operation. The British Dental Association is reported as saying " It is estimated that 2,500 dentists—a fifth of the national total—are over 65. As soon as they can get a pension they will quit."

Newly qualified Dental Surgeons have always shown a preference —and especially so since the introduction of the National Health Service—for work in private practice, and if the situation envisaged above were to materialise, as it might well do, this tendency is likely to be intensified to the further detriment of a School Dental Service already acutely embarrassed by a shortage of Officers. In Cardiff, because of the high age factor already

mentioned, a serious depletion in dental officer staff is a distinct possibility within the next few years, through retirement and other reasons. Should this contingency arise every effort will be needed to make good the deficiency and to encourage further recruitment to the Service. In this connection it may be necessary to re-examine the question of " incentives," especially if we are to obtain candidates of the requisite standard.

Dental Caries.—An improvement in living conditions in post-war years has, in no small way, contributed to the higher general level of health of the community, yet paradoxically, under these very conditions, there has been a significant rise in the incidence of dental caries—especially noticeable since the end of sweet rationing.

In an attenuated School Dental Service the problem of containing the disease within manageable limits by the usual conservative methods is becoming increasingly difficult and with little prospect of any material easement of the dental man-power position, for some years to come, it seems that our main hope must be more and more in the preventive field where a vigorous programme of dental education and propaganda combined with appropriate prophylactic measures including fluoridation of the water supply would go far towards achieving the desired results.

Dentists Act, 1957.—This came into operation on 6th September, 1957, and is essentially an "Act to Consolidate " the enactments relating to dentists and other dental workers with corrections and improvements authorised under the consolidation of Enactments (Procedure) Act, 1949. Amongst other things it serves to amalgamate the provisions of the Dentists Acts of 1878, 1921, 1923 and 1956, which, together with certain parts of the Medical and Dentists Act, 1927, are now repealed.

Ancillary Dental Workers Regulations, approved in draft form in March, came into force in the form of a Statutory instrument on 1st August, 1957. The regulations provide for the enrolment, training and disciplining of any class of ancillary dental worker which may be set up, but actually provide for the establishment of one class only, namely, dental hygienists.

Orthodontia.—In August we lost the valuable services of our Consultant Orthodontist who returned to his native Ireland. Fortunately we were able to obtain a replacement and the new Orthodontist commenced his duties in October on a part-time basis of two sessions per week.

New Clinics.—It is particularly gratifying to report the opening in February last of an entirely new Clinic, complete with Dental Department, at Fairwater, to serve the area which now includes a large housing estate. The Clinic is particularly well sited and architecturally it follows the modern trend towards larger windows and brighter interior decorating in contrasting colours. At present the dental side of the Clinic is being worked on a part-time basis.

A further Clinic is planned for the Llanishen area, but some time must elapse before this new project is brought to fruition.

In the meantime, the Dental Clinic at Canton has been completely redecorated, modified and brought up-to-date with new equipment which includes a Sterling Junior Dental Unit and the latest Walton IV Anaesthetic apparatus. It is the policy of an enlightened Health Department to continue this programme of modernisation and expansion of its services.

The full statistical table of the school dental work carried out during 1957 is as follows :—

(1) Number of Children inspected by the Dentists :—			
(*a*) Periodic Age-groups	3,842		
(*b*) Specials	7,106		
TOTAL ..	10,948		
(2) Requiring Treatment			8,862
(3) Offerred treatment			12,608
(4) Actually treated			9,204
(5) Attendances made by children for treatment			22,347
(6) Half-days devoted to :—			
Inspection	34		
Treatment	2,967		
TOTAL			3,001
(7) Fillings :			
Permanent Teeth	11,329		
Temporary Teeth	743		
TOTAL			12,072
(8) Teeth Filled :			
Permanent Teeth	10,643		
Temporary Teeth	722		
TOTAL			11,365
(9) Extractions :			
Permanent Teeth	4,257		
Temporary Teeth	11,392		
For Regulation purposes (permanent) ..	402		
For Regulation purposes (temporary) ..	594		
TOTAL			16,645
(10) Administrations of general anaesthetics for extractions ..			8,206
(11) Other operations—Permanent Teeth :—			
(*a*) Scalings	745		
(*b*) Cleanings	1,021		
(*c*) Dressings	851		
(*d*) Root Fillings	25		
(*e*) X-rays	78		
(*f*) Crowns	33		
(*g*) Gum Treatments ..	428		
TOTAL			3,181
Temporary Teeth			402
(12) Number of pupils supplied with artificial dentures ..			148

(13) Orthodontics :—

		By Consultant Orthodontist	*By Dental Officers*
(*a*)	Cases commenced during the year ..	57	174
(*b*)	Cases carried forward from previous year	24	111
(*c*)	Cases completed during the year ..	1	82
(*d*)	Cases discontinued during the year ..	8	316 †
(*e*)	Pupils treated with appliances ..	76	164
(*f*)	Removable appliances fitted	117	193
(*g*)	Fixed appliances fitted	—	3
(*h*)	Total attendances	540	1,865
(*i*)	Referred back to Dental Officer with advice	3	—
(*j*)	Referred for X-ray	21	—
(*k*)	Under observation only	35	—
(*l*)	Partly treated and referred back to Dental Officer	9	—
(*m*)	Awaiting Inspection	30	—

†—Includes 155 not recorded as discontinued treatment during 1956.

VII—HANDICAPPED PUPILS

The numbers of handicapped pupils known to the department at 31st December, 1957 are shown in the following table.

BLIND CHILDREN		
At Residential Special Schools ..	4	
At Independent School ..	1	
TOTAL ..		5
PARTIALLY SIGHTED CHILDREN		
At Special Classes for the Partially Sighted	12	
At Residential Schools	2	
TOTAL ..		14
DEAF CHILDREN		
At Residential Schools	16	
At Independent Schools	3	
TOTAL ..		19
PARTIALLY DEAF CHILDREN		
At Residential Schools	1	
At Independent School (Residential) ..	1	
At Maintained Schools (day)	30	
TOTAL ..		32
CHILDREN SUFFERING FROM EPILEPSY		
At Maintained Schools	—	
At Residential Schools	1	
At no School	—	
TOTAL ..		1

CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS

At Special Schools	6	
At Maintained Schools	119	
At other Institutions	—	
At no School or Institution	27	
TOTAL		152

CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS

At Special Schools	—	
At Maintained Schools	65	
At other Institutions	—	
At no School or Institution	3	
TOTAL		68

DELICATE CHILDREN (Children who by reason of impaired physical condition cannot without risk to their health be educated under the normal regime of an ordinary school)

At Special Day Schools	91	
At Special Residential Schools, etc.	—	
At no School	7*	
TOTAL		98

* All these 7 children receive home tuition

PHYSICALLY HANDICAPPED CHILDREN

At Residential Special Schools	8	
At Special Day Schools	12	
At no School	6*	
At Independent Schools	2	
TOTAL		28

* All receive home tuition

EDUCATIONALLY SUB-NORMAL CHILDREN

At Special Day Schools	207	
At Special Residential Schools	3	
At Maintained Schools	212	
At Independent Schools	2	
At no School or Institution	3*	
TOTAL		427

* 2 of these children are receiving home tuition

MALADJUSTED CHILDREN

At Independent Schools	2	
At Maintained Schools—in Residential Hostels	4	
At Maintained Schools awaiting admission to Hostels or Special Schools	5	
At no School or Hostel	—	
TOTAL		11

During the year 171 children, who had been reported as being handicapped pupils were specially medically examined, with the following results :—

Educationally sub-normal and suitable for education in a special school (day)	58
Educationally sub-normal and suitable for education in a residential special school	2
Educationally sub-normal—to have special educational treatment in an ordinary school	34*
Children for whom a decision regarding their capabilities has been deferred	13
Educationally sub-normal but do not require supervision after leaving school	4
Pupils of Gabalfa Special School for educationally sub-normal children :	
(*a*) Granted permission to leave before attaining the age of 16 years	2
(*b*) Recommended to return to ordinary school	1
(*c*) Recommended to remain at Gabalfa Special School until the age of 16 years	—

* 13 of these children were examined for special educational treatment in ordinary school by Educational Psychologist. Special Medical Examination was not considered necessary in these cases.

Pupils at Llanishen Court Special School for educationally sub-normal children recommended to return to ordinary school	2
Children transferred to the care of the Local Health Authority	27
Children transferred from care of Local Health Authority for special educational treatment at Special School	—
Children transferred from care of Local Health Authority and recommended for teaching in own home	—
Blind—for admission to a residential special school	2
Partially sighted—for special school or class	1
Deaf—for admission to a residential special school	1
Partially Deaf—for admission to a residential school	—
Physically handicapped—for admission to a special day school	4
Physically handicapped—recommended for Course of Training	—
Maladjusted—for admission to a residential Hostel or Special School	7
Epileptic—for admission to a residential special school	—
Recommended for Home Teaching	13

Twenty-eight children were notified to the Local Authority during 1957 in accordance with Section 57 of the Education Act, 1944, one appeal being received

Greenhill Open-air School.—In addition to the above examinations, 54 children were found to be delicate pupils and recommended for admission to the Greenhill Open-air School. The average number of delicate children on the register during the year was 103, and the average attendance during the year was 79. Forty-nine children (32 boys and 17 girls) were admitted to the school, and 46 (24 boys and 22 girls) were discharged.

Cerebral Palsy Unit.—During June, 1957, a separate unit for children suffering from the effects of cerebral palsy was opened.

Situated in the grounds of the Greenhill House Open-Air School at Rhiwbina on the outskirts of the City, it caters for a maximum of 15 educable children between the ages of 5–15 years.

Cases are selected according to the degree of spasticity present and children under 10 years and those likely to benefit from daily physiotherapy and speech therapy are given priority.

The single storey building is situated on elevated ground with a pleasant southerly aspect and comprises a hall, two class-rooms, a physiotherapy room, a speech therapy room, a staff room, store rooms, toilets, W.C., etc.

Furnishings and equipment to suit the general and individual needs of the spastic pupils attending the school are provided.

The general daily administration and supervision of the school is carried out by the Headteacher of the Open-Air School for Delicate Children. The full-time staff of the Unit consists of a teacher, a physiotherapist, a qualified nursery assistant and a helper. A school nurse and speech therapist devote part-time duties to the Unit. A school medical officer visits the school each week and at less frequent intervals, about once every two weeks, the medical officer of the R.H.B. orthopaedic clinic also visits the school.

Transport for the children to and from the school is at present provided by hired cars.

All the children take part in routine school activities within the limits of their physical capabilities. Physiotherapy is given daily and speech therapy several times weekly to those requiring this treatment.

Meals are provided from the central kitchen in the Open-Air School.

Although the Unit has only been opened for a short time, there has been no difficulty in filling the optimum number of places with suitable pupils, and in some of these considerable improvement has already taken place.

The parents of the children also have expressed appreciation of this newest service for the physically handicapped pupils.

CHILDREN WITH DEFECTIVE HEARING

Ascertainment.—Head Teachers are encouraged to refer children who have difficulty in hearing to the visiting Health Visitor for testing of their hearing. Health Visitors are instructed to refer all children with defective hearing to the Ear, Nose, and Throat Clinics which are held regularly in each area school clinic. This instruction also applies to children under school age whom the Health Visitor sees at infant welfare centres or at home. In addition to the school clinics the Cardiff Hospital Management Committee have built and equipped an Out-Patient Department at their Children's Ear, Nose and Throat Hospital. This Department is a complete audiology centre, and a qualified audiometrician, Miss P. Theophilus, is available for audiometric testing of any children referred.

Treatment.—A Peripatetic teacher is employed full-time by the Education Authority to advise parents and visit pupils at any schools maintained by them to give lip-reading instruction, speech improvement lessons and training in the use of hearing aids. After a trial period of one year the Authority approved the scheme as permanent in view of the benefits brought to partially deaf children. The teacher is Mrs. Margaret Aanensen, B.A., who was sent by the Authority to take a one-year course at the Department of Education of the Deaf at Manchester University under Professor and Mrs. Orr-Ewing, in 1948-49. Mrs. Aanensen returned to Cardiff and was Headmistress of the Oral School for the deaf until it was closed. Sixteen partially deaf children are being educated in day schools under these arrangements.

SPEECH THERAPY

by Miss B. M. R. MORRIS, L.C.S.T., Senior Speech Therapist

At the commencement of 1957 three Speech Therapists, Miss M. Morris, Miss I. Newman and Mrs. T. G. Meade (part-time) were employed. At the end of January we were joined by Miss C. Lewis as a full-time Therapist. Work was started again by Miss Lewis and Miss Newman at Galbafa and Llanishen Court Special Schools and at Greenhill Open Air School.

In March new Centres were arranged at Llanrumney and Heol Hir Secondary Modern Schools. The Llanrumney cases had previously attended at Rumney and a great improvement in attendance was noted as soon as the new Centres were opened.

Several changes took place in September. Miss Newman was re-engaged after her marriage, in a part-time capacity, for afternoon sessions at Central Clinic. We welcomed two new appointments to the staff in Miss J. Simons, who took over Heol Hir and Llanrumney Secondary Modern Schools, Splott Clinic and Gabalfa Special School, and Miss J. Shepherd who was appointed principally for the newly opened Spastic Unit at Greenhill Open Air School but she took over cases at the Open Air School as well, the remainder of her time being spent at the Canton and Fairwater Clinics. The Senior Speech Therapist was enabled to have a session for administration. The total complement was now four full-time and two part-time Therapists, undertaking a total of 54 sessions weekly. Of these, 39 sessions were spent in Clinics, 11 sessions in Special Schools, 3 sessions in visiting and one session in administration. Unfortunately Miss Shepherd resigned at the end of the year to take a post in Swansea. The Canton and Fairwater Clinics have been taken over by Miss Morris, Miss Lewis and Mrs. Meade, but the 6 cases at the Spastic Unit and 5 cases at the Open Air School have had to be suspended pending a new appointment being made.

The statistics relating to the work for the year show that the total number of children treated was 448. New cases admitted during the year were 272 and those discharged 177. In addition, 102 children were being kept under observation and the treatment of a further 27 was suspended. Twelve of this number were pupils of the Gabalfa Special School or Llanishen Court Special School. Two hundred and nine children were awaiting appointments at the end of the year. The Speech Therapists made 236 visits to Schools and to the homes of children during the year.

The clinical conditions treated and the results at the time of discharge are shown on the accompanying table.

DISCHARGES, 1956

	Speech normal	Much improved	Tempo-rary discharge	Left district	In hospital	Unlikely to benefit	Left School	Failed to attend	Total
Stammer ..	10	15	6	3	—	1	3	14	52
Dyslalia	16	23	14	3	1	5	—	31	93
Dysphonia ..	—	—	1	—	—	—	—	—	1
Spastic	—	—	1	1	—	—	1	—	3
Nasal Sigmatism	1	—	1	—	—	—	—	1	3
Lateral „	3	4	1	2	—	—	—	5	15
Interdental „	4	1	1	—	—	—	—	—	6
Cleft Palate ..	—	—	—	—	—	—	—	—	—
Rhotacism ..	—	1	—	—	—	—	—	—	1
Partial Deafness	—	—	1	—	—	—	—	—	1
Other Complaints	1	—	—	—	1	—	—	—	2
Totals ..	35	44	26	9	2	6	4	51	177

CHILD GUIDANCE CLINIC

REPORT FOR 1957 of

Mr. ROBERT ROBERTSON, M.A., B.Ed., Educational Psychologist-in-Charge

1. Report of the Work of the Child Guidance Clinic

From the Child Guidance Clinic there emerge various reports to the Education and Health Departments. These are monthly, quarterly and annual; they are statistical summaries and provide brief outlines of the work done in the clinic.

The purpose of this annual report is to give a more detailed, more intimate account of the child guidance work carried out with its empahsis on the descriptive rather than on the statistical. It is a confidential report to the Education and Health Departments. Different facets of child guidance are illustrated, and over a period of years these lengthier, more meaningful accounts may be regarded as interesting supplements to the periodic statistical analyses.

The report covers the period 1st January, 1957 to 31st December, 1957, to fall in line with the practice of the Health Department which relates to the calendar, not the school year.

The Psychiatric duties at the clinic are carried out on a part-time basis by Dr. Gaynor Lacey, M.B., B.S., D.P.M., and Miss F. Meredith is responsible for the psychiatric social work.

The clinic secretary, Miss Serjent, has to be commended, for upon her in large measure depends the efficiency and smooth running of the clinic. In addition, she has been responsible for collating in summary form certain details from case-histories which are dealt with in this report.

2. Sessions

The clinic functions as such on three half-days each week; on Tuesday and Thursday afternoons for seeing children and parents; and on Friday mornings for weekly case conferences.

In general two new cases are seen each Tuesday and Thursday afternoon; in addition, four old cases are reviewed.

3. Number of Cases

The number of cases dealt with in the period 1st January, 1957 to 31st December, 1957 is shown in the following table.:—

TABLE I

	Boys	Girls	Total
Number of new cases referred	96	53	149
Number of old cases carried forward ..	63	33	96
Number of cases on waiting list ..	15	9	24

It is apparent this year again that more boys than girls have been referred to the Child Guidance Clinic. This is commonly found, for boys tend to present more behaviour difficulties than girls in their upbringing and schooling.

4. **Sources of Referral** of cases dealt with for the first time in this clinic are shown in the following table :—

TABLE II

Parents or guardians	14
Probation Officers	2
Social Agencies	2
Schools	25
School Health Service	44
Private Doctors	30
Other Sources	16
Total ..	133

It is sometimes difficult to arrive at accurate classification, for cases are not infrequently, for example, referred by parents and headteachers to health visitors and school nurses for onward transmission via the School Health Service to the Child Guidance Clinic.

5. **Reasons for Referral**

Classification of reasons for referral is not always easy ; it is invariably arbitrary ; it over-simplifies and glosses over complexity. It is seldom that causation is simple ; most frequently are several factors operative simultaneously. However, the following table gives as accurate an analysis of the various reasons as is practicable.

TABLE III

NERVOUS DISORDERS—	
Fears	24
Seclusiveness	5
Depression	2
Excitability	1
Obsessions	3
	35
HABIT DISORDERS AND PHYSICAL SYMPTOMS—	
Speech disorders	6
Sleep	7
Movement	12
Feeding	8
Excretory	17
Nervous pains	4
Fits	4
	58

Behaviour Disorders—		
Unmanageable		27
Temper		10
Aggressiveness		14
Jealous		3
Demanding attention		1
Stealing		23
Lying, romancing		7
Truancy		20
Sex difficulty		3
		108
Educational Difficulties—		
Backwardness		13
Inability to concentrate		4
Special disabilities		1
		18
For Special Examination—		
Educational advice		2
Admission to Special School		2
		4
		Total : 223

The referrals that bulked largest were the behaviour disorders (108) ; next were the habit disorders (58) ; next were the nervous disorders (35) ; and next were the educational difficulties (18).

The commonest difficulties in the children referred were :—unmanageable (27), fears (24) ; stealing (23) ; truancy (20) ; excretory (17) ; aggressiveness (14) ; backwardness (13) ; movement (12) ; and temper (10.)

6. **The ages** of the children examined for the first time at the clinic are shown in Table IV.

TABLE IV

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
Boys ..	—	1	3	3	6	7	6	8	12	15	11	7	4	6	1	1	91
Girls ..	—	—	—	—	4	7	4	1	5	6	6	2	3	4	—	—	42
Total ..	—	1	3	3	10	14	10	9	17	21	17	9	7	10	1	1	133

Of these 133 children : 7 were pre-school ; about 34 were Infants ; about 64 were Juniors ; and about 28 were post primary pupils.

The greatest number are of Junior School age ; practically all ages are represented ; the age-range has been from 2 years to 16 years, with appreciable numbers from 3 years to 14 years.

7. **Table V** shows the results of treatment and disposal of cases discharged.

TABLE V

Adjusted	40
Partially adjusted	28
Advisory	8
Transferred to School Health Service ..	3
Transferred elsewhere	2
Failed to co-operate	31
Left Cardiff	2
Withdrawn	7
Recommended for admission to Institutions ..	9
Admitted to Institutions	3
	133

Of these, 68 were closed as adjusted or as partially adjusted : a good record in such cases as were considered likely to respond to fairly rapid treatment.

Eight were closed after advice had been given to parents, family doctors or head-teachers, generally in cases where further supportive interviews were not considered necessary.

As many as 31 cases were closed where failure to co-operate on the part of the parents stultified the efforts of the clinic staff. Such closures took place only after several offers of further appointments had been declined or ignored.

8. **Table VI** indicates the work of the sections :—

TABLE VI

	Exam.	Treatment	Parents	Others	School	Home
Psychologist ..	109	128	155	17	76	3
Psychiatrist ..	108	147	87	2	—	—
Psychiatric Social Worker	312	—	—	74	5	19

9. **Conferences**

There have been 50 conferences in the period covered by this report.

10. **Miscellaneous**

There have been 16 visitors to the Clinic. These have included Social Science students attached to the clinic for varying periods to obtain experience in child guidance work ; officials from the Ministries of Education and National Insurance ; and visitors from overseas.

Talks have been given by Miss Meredith to the Queen's Nurses and Student Health Visitors.

11. **General Description** of the work of the Clinic.

The cases dealt with this year in the Clinic have been, as ever, extremely varied. They have ranged from the physical through the social and educational to the behavioural and psychological. Though referrals are made in fairly simple terms, the cases are almost invariably complex in nature. These cases have been classified neatly and tidily in Table III (as they always must be for compact presentation), yet the case-histories—even where the salient points have been striking—have jostled with the inter-play of varying attitudes and emotions, with difficulties of personality or of housing, of eating or of sleeping, of traits or of habits, of work or of play.

After referral, the clinic secretary normally sends for school reports and arranges appointments for the children and the parents. Occasionally fathers come, though usually it is the mother who fetches the child to the clinic. Where necessary, medical records are sent for from the School Health Service, though that practice has been less frequent during the last few years ; in most cases the parent's account of the child's medical record and confirmation by the psychiatrist's enquiries and examination, are taken to be sufficient.

At this point come investigation and diagnosis. The child is interviewed and the parent is interviewed. The findings in each case are complex and detailed. They relate to the child's total personality in his environment—his school and home life, his likes and dislikes, his abilities and aptitudes, and the interpersonal and interparental relationships, his leisure activities and ambitions, his habits and routines. The picture in each case is filled in with innumerable details in a search for the basic drives and attitudes in the parent and child, for these are often the underlying causes of the problems referred. Without a grasp of these attitudes and motivations even the " simplest " of behaviour difficulties—bedwetting, truanting, stealing, biting, etc.—are not likely to be understood or resolved.

Occasionally a case is dealt with there and then : the problem is discussed with the parent, advice is given and the case closed. Normally, however, cases are in the first instance discussed fully in the Friday morning staff conference and followed up over a period by supportive interviews, home and school visits, and sometimes further contacts are made with Health visitors, clergymen, the Children's Department, Welfare bodies and the like.

Children are seldom dealt with by disposal to Children's Homes or by transfer to another school. Treatment consists most often of modifying existing attitudes : solutions to specific difficulties, suggesting changes in the routine of family life, stressing the need for change in parental attitudes.

With some children direct talk from a respected stranger has its effect. With others the influence on the parents (usually the mother) is more effective in encouraging a change in the environment, occasionally in material ways, though usually in matters relating to the climate of ideas, emotions and attitudes in the home.

In some cases the change is effected quite soon ; in others it takes time. In some the change is complete, whereas in others the change is only partial, particularly where the attitudes are deep-rooted.

12. **Additional Survey**

As for the previous report, the clinic secretary, Miss Serjent, has continued to note certain features of case-histories, e.g. intelligence level, housing, medical record, etc. It was considered that interesting conclusions might result from a survey over a period of one year. Some comments are made in the following sections.

13. **Sex**

Of the 110 children in this particular survey, 76 were boys and 34 were girls. Clearly boys outnumber girls in the work of the clinic.

14. Intelligence

The distribution of intelligence quotients for these children is shown in Table VII.

TABLE VII

I.Q. Group	Boys	Girls	Total
130–4 ..	—	2	2
125–9 ..	4	—	4
120–4 ..	4	—	4
115–9 ..	11	2	13
110–4 ..	4	2	6
105–9 ..	7	6	13
100–4 ..	9	6	15
95–9 ..	8	3	11
90–4 ..	8	1	9
85–9 ..	8	—	8
80–4 ..	5	7	12
75–9 ..	4	3	7
70–4 ..	1	2	3
65–9 ..	—	—	—
60–4 ..	2	—	2
55–9 ..	—	—	—
50–4 ..	1	—	—
Total ..	76	34	110
Average I.Q.	99·7	106·9	100·2

From the table, it is clear that there is a good distribution of intelligence throughout the group of boys and girls, that the average of the whole group is normal, and that the average for boys is appreciably below the average for girls.

15. Medical Record

Details of the children's medical records are given in Table VIII.

TABLE VIII

T.B.	5
T.B. in mother	1
T.B. in father	1
T.B. Meningitis	4
Asthma	3
Poor Vision	2
Very bad medical history	2
15 mastoid operations	1
Spastic, glandular fever	1
Been in Dulwich House (Rheumatism Hospital)	1
Severe bronchitis	1
Orthopaedic defect	1
Pink's disease	1
	24

About a quarter of the cases related to children who have had more than the usual run of minor ailments.

16. Religion

Since little of general significance was found in the previous survey, this was not followed up. In certain cases, difficulties do arise in mixed marriages, but in the main it is found inadvisable to press this aspect of family life in Child Guidance Clinic work.

17. Place in family

It was felt that some significance might emerge from a survey of the child's place in the family. Table IX summarises the findings :—

TABLE IX

Only child	5 boys		9 girls																14
Two children	(1)	20	(2)	20															40
Three ,,	(1)	10	(2)	9	(3)	8													27
Four ,,	(1)	7	(2)	2	(3)	1	(4)	1											11
Five ,,	(1)	2	(2)	3	(3)	3	(4)	—	(5)	3									11
Six ,,	(1)	—	(2)	1	(3)	3	(4)	—	(5)	1	(6)	—							5
Seven ,,		—		—		—		—		—		—				—			—
Eight ,,		—		—		—		—		—		—	(7)	1	—				1
Nine ,,		—		—		—	(4)	1		—		—		—	—	—			1
																			—
																			110

From the table it cannot be said that place in family is particularly significant in maladjustment, for most of the positions are pretty well represented throughout.

Though not all of these families will be completed families, it can at least be said that large families do not predominate. We know that large families are not so common nowadays ; but in this group of 110 children, only 29 (i.e. about a quarter) belong to families of 4 or more children. It cannot be said that size of family is particularly associated with maladjustment.

If anything it may be said that maladjustment occurs more often in rather smaller families : though it must always be remembered that this is not a large sample, that these families are not necessarily completed, and that small families are more usual in the whole community nowadays.

Sibling jealousy is commonly spoken of as a difficulty in families. In a family of two, where sufficient preparation has not been made, the first is often said to resent any transfer of attention to the newly born. Yet from the above figures, the matter is not so simple : where jealousy occurs, it affects the second-born equally as the first-born. It depends rather on parents and parental attitude rather than simply on the child.

In a family of three, especially where there have been no appreciable time-lags, the second is often said to be the one who misses most attention and resents both the older and the younger. Actually, from the above table, though the figures are not decisive, they do appear to suggest that the attention passes on to each newly-born and that the resentment is greater the older the child.

In a family of four it appears that the first child resents being displaced from being the sole recipient of attention, but that the others are scarcely affected in this respect at all.

With larger families, there is scarcely any significance attaching to place in family, probably because the whole family tends to appreciate from an early age that personal attention is not to be expected as things are.

18. Where the difficulties for which the children were referred to the clinic mainly occur are shown in Table X.

TABLE X

Home	68
School	12
Both home and school	30
	110

It is clear that most of the difficulties occur in the home. Nor is this surprising for a high standard of behaviour is expected and secured in the school environment with its friendly discipline and its more uniform degree of stability.

19. **Housing Accommodation**

Accommodation is indicated in a very general way in Table XI.

TABLE XI

Own house	33
Council house	44
Old house	24
Flat	1
Club flat	1
House and shop	1
Flat over offices	1
Unfurnished house	1
Rooms	4
	110

Eight of the families live with relatives. But in the main the details under this heading are too complex to produce any clear conclusions.

20. **Broken Homes**

More significant is the number of broken homes shown in Table XII.

TABLE XII

Adoption	6
Fostered	1
Illegitimate	1
Mother dead	2
Father dead	5
Parents separated	9
Divorced	1
Father deserted	3
Father deserted, mother re-married ..	1
Mother divorced, remarried	1
	31

More than a quarter of these 110 cases represents homes that have been broken: a very considerable proportion indeed of homes which differ significantly from the normally constituted home wherein both parents may play a part in shaping the lives of their offspring.

21. Parental Disharmony

It is not easy to say exactly what constitutes parental disharmony ; but that this clearly does exist is noted in 20 cases, i.e. to such a degree as to constitute a serious contributory factor in maladjustment.

22. Both parents work

This is noted in 26 cases, i.e. about a quarter of the total.

23. Father's Occupation.

The occupations noted cover a very wide range from the skilled to the unskilled. Whilst in individual cases it is important and sometimes significant to know what job the father has, no generalisation can be made in relation to maladjustment.

24. Parents neurotic or psychotic

It is not easy to establish a criterion as to the mental condition of parents that is not affected simply by personal assessment. Yet so many parents were found to have had nervous breakdowns, to have been in- or out-patients of psychiatric departments of hospitals that a note was made of cases wherein fairly serious disturbance existed in parents. Table XIII gives a general (and guarded) indication of these.

TABLE XIII

Both parents neurotic or psychotic ..	20
Mother neurotic or psychotic	8
Father neurotic or psychotic	1
	29

This represents a very considerable proportion of the cases considered. The fathers appear to come out of his rather better than the mothers, but then they seldom appear at the Clinic and they have less contact with their children. From these general figures, none the less, it is not surprising that the children concerned should have become maladjusted and have been referred for guidance.

25. Remarks

In an additional remarks column, there are about 22 cases represented. Apart from illegitimacy, fostering, and adoption, 3 fathers have been in prison ; one set of parents were summoned by the N.S.P.C.C. for neglect ; one step-father was fined for living on immoral earnings ; three separate siblings had previously attended the clinic ; one sibling was paranoic ; one mother was paralysed ; one family had been evicted ; one maternal aunt was melancholic in mental hospital ; one family had a bad record of schizophrenia and suicides ; in another there was serious religious conflict ; one father was shell-shocked and aphasic ; two stepfathers showed extreme impatience and dislike ; in one family there were serious financial difficulties and in another the second marriage was turning out badly.

In all, a very considerable proportion (about a fifth) of the cases in which serious disturbances had occurred.

26. Comments

A few comments may be made about these 110 children as a group.

(1) As a group they are of average intelligence, and practically all levels of ability are represented.

(2) There are appreciably more boys than girls in the group.

(3) About a quarter of the group have been affected by fairly serious ill-health.

(4) Small families predominate in the group. Though nothing can be said with any certainty about position in family, it seems that sibling rivalry equally affects each child in families of two, whereas in families of three or four the eldest child tends to be most prone to feelings of jealousy.

(5) Most of the difficulties relate to the home rather than to school.

(6) In individual cases accommodation difficulties often prevail; yet in the group nothing really striking emerges in this connection.

(7) In this group the number of broken homes is striking (31).

(8) Parental disharmony (in at least 20 cases) is another appreciable and significant factor.

(9) Yet another is that in 26 cases both parents work.

(10) Father's occupation cannot be said generally to be significant, though it often is in individual cases.

(11) Another significant factor is that in about 29 cases one or other or both parents are themselves more or less seriously maladjusted.

(12) These points clearly emerge from the survey of this group :—boys predominate; ill-health is an important subsidiary feature, as is the fact that both parents work; more significant still is the broken home, parental disharmony and fairly serious instability in the parents.

Statistics.—The following is a summary of the work of the Child Guidance Clinic :—

(1) Number of patients referred to the Clinic during the year :—

Boys	96
Girls	53
TOTAL	149

(2) Number of patients carried forward from 1956 :—

Boys	63
Girls	12
TOTAL	75

(3) Sources of ascertainment of patients actually dealt with for the first time :—

Parents or Guardians	14
Juvenile Court	—
Social Agencies	2
Schools	25
School Health Service	44
Other sources	16
Probation Officers	2
Private Medical Practitioners	30
TOTAL	133

(4) Problems for which patients were referred to the Clinic :

Nervous Disorders

Fears	24
Seclusiveness	5
Depression	2
Excitability	1
Apathy	—
Obsessions	3
TOTAL	35

Habit Disorders and Physical Symptoms

Speech Disorders	6
Sleep	7
Movement	12
Feeding	8
Excretory	18
Nervous pains and paralysis	3
Fits, disorders	4

Behaviour Disorders

Unmanageable	27
Temper	10
Aggressiveness	14
Jealousy	2
Demanding attention	2
Stealing	26
Lying and romancing	7
Truancy	20
Sex difficulty	3

Education and Vocational difficulties

Backwardness	13
Inability to concentrate	4
Inability to keep jobs	—
Special Disabilities	1

For special examination

Physchological examination	—
Educational advice	2
Vocational guidance	—
Court examination	—
Admissions to Special (not M.D.) residential school, etc.	2
Placement in Foster Homes	—
Adoption	—

Number of patients dealt with 200

(5) Age of patients dealt with for the first time :—

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
Boys ..	—	1	3	3	6	7	6	8	12	15	11	7	4	6	1	1	91
Girls	—	—	—	—	4	7	4	1	5	6	6	2	3	4	—	—	42
Total	—	1	3	3	10	14	10	9	17	21	17	9	7	10	1	1	133

(6) Results of treatment of patients discharged :—

Advisory	9
Adjusted	40
Partially adjusted	28
Unadjusted	—
Transferred to other agencies	3
Withdrawn	7
Failed to co-operate	37
Unsuitable for further treatment ..	—
Left Cardiff	2
Total	128

(7) Number recommended for admission to Residential Schools or Hostels 9

Number admitted to Residential Schools or Hostels 3

(8) Work of Sections :—

(*a*) *Psychiatric*

Patients examined	108
Treatment interviews	147
Interviews with parents	131
School visits	—
Other interviews	6
Home visits	—

(*b*) *Psychological*

New patients dealt with	109
Re-examinations	98
Remedial teaching	—
School visits	76
Interviews with parents	155
Other interviews	17

(*c*) *Social Service*

Interviews with parents, etc., at Clinic	312
Visits to homes of patients	19
School visits concerning patients ..	5
Other visits concerning patients ..	74

(9) Staff conferences regarding patients	44
Staff Conferences	779

(10) Number of patients waiting to be dealt with at end of year :—

Boys	15
Girls	9
TOTAL	24

VIII—NURSERY SCHOOL AND CLASSES

Severn Road Nursery School.—During the year the average number of children on the register of Severn Road Nursery School was 100, the average attendance being 82.

There are eight Nursery Schools and two Nursery Classes in the City, situated as follows :—

Nursery Schools :	1.	CANTON	Severn Road
	2.	GRANGETOWN ..	Ferry Road
	3.	SPLOTT	Moorland Road
	4.	ELY	Vachell Road
	5.	SPLOTT (Tremorfa)	Baden Powell School
	6.	ELY	Hywel Dda School
	7.	SOUTH (Docks) ..	West Close, Bute Street
	8.	RUMNEY ..	Rumney School
Nursery Classes :	1.	NINIAN PARK ..	Ninian Park School
	2.	ADAMSDOWN ..	Tredegarville C/W School

Accommodation is provided at the Nursery Schools for a total of 486 children aged 2—5 years. At the Nursery Classes 60 children aged 2—5 years can be accommodated.

Health Visitors pay a visit to each Nursery School and Class at least once in each week and very often at more frequent intervals as such visits become necessary. A Medical Officer visits the Nursery Schools and Classes at intervals of approximately one month for the purpose of medically inspecting new entrants and of reviewing the health of pupils.

The number of children medically inspected during 1957 as "Entrants" to the Nursery Schools and Nursery Classes was 362 (191 boys and 171 girls) and the defects found (excluding uncleanliness, dental caries and defects of nutrition) were as follows:

Disease or Defect	Number of Defects	
	Treatment Required	Requiring to be kept under Observation only
SKIN:		
Ringworm Scalp	—	—
Ringworm Body	—	—
Scabies	—	—
Other Diseases	—	1
EYE:		
Defective Vision	4	—
Squint	—	—
External Eye Disease	—	—
Other Eye Disease	—	—
EAR:		
Defective Hearing	—	1
Otitis Media	—	—
Other Diseases	—	—
NOSE AND THROAT	11	34
DEFECTIVE SPEECH	1	6
ENLARGED CERVICAL GLANDS	—	4
HEART AND CIRCULATION	—	—
LUNGS	4	—
DEVELOPMENTAL:		
Hernia	—	—
Other	—	—
ORTHOPAEDIC:		
Posture	—	2
Flat Foot	1	1
Other	4	24
NERVOUS SYSTEM:		
Epilepsy	—	—
Other Conditions	—	1
PSYCHOLOGICAL		
Development	—	—
Stability	—	—
TEETH:		
Dental Diseases	—	—
OTHER DEFECTS AND DISEASES	—	—
TOTAL	26	74

The number of children referred for medical treatment was 26.

The following is a classification of the physical condition of the children inspected:

	Number	*Percentage*
Satisfactory	227	62·7
Unsatisfactory	135	37·3

Two children were found to be unclean.

Health Visitors visited the Nursery Schools and Classes on 452 occasions during the year and paid 314 visits to the homes of the pupils.

IX—PREVENTION OF TUBERCULOSIS

Dr. A. H. GRIFFITH, M.B., B.S., D.P.H., Senior Medical Officer

Antituberculosis work in Cardiff Schools during 1957 consisted of investigating possible spread of infection from teachers found to be suffering from pulmonary tuberculosis and increasing the resistance of certain 13 year-old-children by means of B.C.G. vaccination.

One teacher was notified as suffering from pulmonary tuberculosis during the year. All children at his school were offered tuberculin tests within a fortnight of the discovery of the condition and as a result of these tests a number of children were required to undergo chest x-ray examinations. As a result of these investigations, 3 pupils in the teacher's class were found to have clinical tuberculosis and required medical treatment. Three months later, the tuberculin tests were repeated on the previously tuberculin negative children and all tuberculin positive children were again x-rayed. The second x-ray survey showed another pupil to be suffering from tuberculosis.

In accordance with instructions from the Ministry of Health, B.C.G. vaccination was offered to all 13-year-old children who were found to be tuberculin negative. The tuberculin positive children, that is, children who show evidence of having been previously infected with tubercle bacilli, were not vaccinated. The acceptance rate for B.C.G. was 82 per cent, which can be considered to be satisfactory.

New methods of administering B.C.G. were tried out during the year. The usual current method of vaccination involves injecting a small dose of the vaccine into the skin on the upper arm of a child. Although this method gives a good degree of protection it gives rise to small, slow-healing local ulcers and small scars. The new method of vaccination, by means of multiple puncture apparatus, was found to give a good conversion rate at the end of a year (94 per cent) and it did not give rise to objectionable sores or scars. It is hoped that this method of vaccination will be developed further.

Three day courses for Medical Officers in the theory and practice of tuberculin testing and B.C.G. vaccination were again held under the joint control of Professor F. R. G. Heaf and Dr. W. Powell Phillips. Medical Officers sent by various local authorities in England and Wales attended these courses.

The following tables indicate the work done by the School Health Department with regard to the B.C.G. programme in schools during 1957.

TABLE I. SHOWING THE NUMBER OF CHILDREN TUBERCULIN TESTED AND GIVEN B.C.G. IN SCHOOLS DURING 1954–1957

	Years		
	1955	1956	1957
Number of children offered B.C.G.	4,409	2,910	3,490
Number of refusals	966	663	619
Acceptance Rate	78%	77%	82%
Number of children tuberculin tested	3,443	2,247	2,881
Number of positive reactors ..	990	490	471
Number given B.C.G. vaccine	2,453	1,757	2,410

TABLE II. SHOWING THE PROPORTION OF TUBERCULIN POSITIVE REACTORS AMONG 13-YEAR-OLD CARDIFF SCHOOLCHILDREN DURING 1954–57

Year	Number of 13-year-old school children		Per cent of 13-year-old children tuberculin positive
	Tuberculin Tested	Found to be tuberculin positive	
1954 ..	1,173	282	24·0
1955 ..	1,885	352	18·7
1956 ..	1,919	360	18·8
1957 ..	2,504	426	17·0

TABLE III SHOWING THE RESULTS OF POST B.C.G. TUBERCULIN TESTS CARRIED OUT DURING 1956

Year B.C.G. given	Number Tuberculin Tested during 1957	Number Tuberculin Positive	% Tuberculin Positive	Number Tuberculin Negative	Number re-vaccinated
1954	223	223	100	—	—
1955 ..	643	639	97·8	4	—
1956	1,233	1,196	97·0	37	4

X—MISCELLANY

INFECTIOUS DISEASES

The number of schoolchildren ascertained to be suffering from infectious diseases during the year were as follows :—

Scarlet Fever	100
Whooping Cough	252
Diphtheria	—
Measles	1,935
Acute Pneumonia	49
Meningococcal Infection	—
Paralytic Poliomyelitis	—
Non-Paralytic Poliomyelitis	—
Acute Encephalitis— Infective	—
Dysentery	4
Para-Typhoid Fever	—
Enteric or Typhoid Fever	—
Tuberculosis—Respiratory	25
Other Forms	9
Chickenpox	322
Erysipelas	—
Food Poisoning	3

In addition the following children were notified by Head Teachers as absent from school due to the diseases stated :—

Rubella	39
Mumps	443
Jaundice	38
Whooping Cough	370

The following schoolchildren were notified by Medical practitioners under the Public Health (Tuberculosis) regulations :—

Tuberculosis—Respiratory	19
Other forms	8

PROVISION OF MEALS

Kitchens are in operation at Central and Ely and the following Schools :—Gabalfa Special School, Greenhill Open-air School, Greenway Primary School, Ton-yr-ywen School, Heol Trelai School, Windsor Clive School, Cathays High School, Canton High School, Cardiff High School for Girls, Glantaf School, Gabalfa Primary School, Moorland Primary School, Fairwater Primary School, Lady Margaret High School, Howardian Technical School, Cefn Onn School, Peter Lea School, Brynhafod School, Penybryn School, Heol Hir School, Lady Mary R.C. High School, Gabalfa Infants, Llanrumney Secondary and eight Nursery Schools.

Canteens.—Facilities are available at 109 School Canteens for providing mid-day meals for 10,500 children daily.

The number of children attending primary, high, special and nursery schools provided with dinners and/or milk during the first and last complete weeks of 1957 were as follows :—

	First complete week, 1957	*Last complete week, 1957*
Average number of necessitous children provided with dinner daily free	1,546	1,231
Average number of children provided with milk daily free	34,328	33,893
Average number of children provided with dinner daily on payment	8,362	8,166

MEDICAL EXAMINATIONS OF TEACHERS AND ENTRANTS TO COURSES OF TRAINING FOR TEACHING AND TO THE TEACHING PROFESSION

The School Medical Officer is an examining medical officer for the Education Committee in respect of the entry of teachers into the superannuation scheme. During the year 76 teachers were examined for this purpose.

From 1st April, 1952, the Minister of Education instituted new arrangements for medical examinations for entrants to the teaching profession and for candidates applying for entry to training colleges, university departments of education and approved art schools. (Circular 249, 28th March, 1952.)

The School Medical Officer has the duty of examining candidates applying for admission to training colleges and entrants to the teaching profession except those intending to enter the teaching profession on completion of an approved course of training, in which case they are examined as at present by the College Medical Officer. The School Medical Officer has to fulfil this last obligation in respect of students completing courses at the Cardiff College of Art as he acts as the College Medical Officer.

As a result of these requirements, 148 candidates and entrants were medically examined.

The Minister also directed that x-ray examinations shall be an essential part of the medical examination on entry to the teaching profession as from 1st April, 1953. (Circular 248, 28th March, 1952.)

ACCIDENTS TO PUPILS

Head Teachers are requested to provide details of all accidents occurring to pupils on school premises or arising out of school activities.

During 1957, 153 such reports were made relating to 89 boys and 52 girls and, in addition, to 9 male students and 3 female students of the Technical College and the College of Art.

APPENDIX A

DESCRIPTION OF REGULAR CLINICS

	Minor Ailments	Cleansing Station	Ophthalmic	Orthoptic	E.N.T.	Juvenile Rheumatism	School Dental Service	Speech Therapy	Enuresis Clinic
(a) School Clinics also used for General Health Purposes :—									
Central Clinic, 30 Richmond Road ..	Yes	—	Yes	Yes	Yes	—	Yes	Yes	Yes
Gabalfa Clinic, 213 North Road ..	Yes	—	Yes	—	Yes	—	Yes	Yes	—
College Farm Clinic, Llanidloes Road	Yes	—	Yes	—	Yes	—	Yes	—	—
Splott Clinic, 139 Splott Road ..	Yes	—	Yes	—	Yes	—	Yes	Yes	—
Grangetown Clinic, Cambridge Street	Yes	—	Yes	—	Yes	Yes	Yes	Yes	—
Canton Clinic, Wessex Street ..	Yes	—	Yes	Yes	Yes	—	Yes	Yes	—
Fairwater Clinic, Plasmawr Road ..	Yes	—	Yes	—	Yes	—	Yes	Yes	—
Ely Clinic, Redhouse Crescent ..	Yes	Yes	Yes	—	Yes	Yes	Yes	Yes	—
(b) Temporary School Clinics :—									
Medical Inspection Room, Greenway County Junior School	—	—	—	—	—	—	Yes	—	—
Rumney Infants School, Wentloog Road	Yes	—	—	—	—	—	—	Yes	—
(c) Public Health Clinic available for schoolchildren :—									
Cleansing Station, St. David's Hospital	—	Yes	—	—	—	—	—	—	—

N.B.—Speech Therapy Sessions normally held at Llanishen Court and Gabalfa Special Schools are temporarily suspended. School Nurses also treat minor ailments at Llanrumney C.P. School and Cefn Onn C.P. School.

January, 1958

APPENDIX B

Temporary Clinics

Temporary arrangements are still necessary to cover the urgent needs of the Rumney and Llanrumney areas of the City.

These areas are situated in the Roath Ward and were transferred from Monmouthshire in 1939, and have been the scene of extensive building, both of private and council houses.

Approval has been given by the Government, and a Health Clinic is now being built at Llanrumney Avenue by the Local Authority, but, in the meantime, a full-time School Dental Officer, holding a temporary appointment, is accommodated in the Medical Inspection Room at Greenway County Junior School.

A small waiting room has been converted for use as a Dental Recovery Room, and when necessary, a further room is made available by the Head Teacher for waiting accommodation.

Temporary arrangements have been made for the holding of Minor Ailments Clinics, and sessions for Speech Therapy, at the Rumney Infants School at Wentloog Road, where one room has been specially equipped for this purpose.

The treatment of minor ailments has also been arranged at the Brynhafod and Penybryn Schools.


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